2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36704

FILED Jan 04, 2008 Secretary of State

Entity Name: FLORIDA THOROUGHBRED CHARITIES, INC.

Current Principal Place of Business: New Principal Place of Business:

801 SW 60TH AVE. OCALA, FL 34474

Current Mailing Address: New Mailing Address:

801 SW 60TH AVE. OCALA, FL 34474

FEI Number: 59-2991947 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HANCOCK, RICHARD E 801 SW 60TH AVE. OCALA, FL 34474 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: SANAN, NADIA Name: CAMPBELL, GILBERT G

Address: PO BOX 1260 Address: PO BOX 381

City-St-Zip: SUMMERFIELD, FL 34492 City-St-Zip: TYNGSBORO, MA 01852

Title: T () Delete Title: () Change () Addition

 Name:
 GILLIAM, MICHAEL
 Name:

 Address:
 801 SW 60TH AVE.
 Address:

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:

Title: ED () Delete Title: () Change () Addition

 Name:
 HANCOCK, RICHARD E
 Name:

 Address:
 801 SW 60TH AVENUE
 Address:

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:

 $\label{eq:title:title:VP} \textit{Title:} \qquad \textit{VP} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{VP} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

 Name:
 DIZNEY, DONALD R
 Name:
 EDDIE, MARTIN

 Address:
 PO BOX 1100
 Address:
 3900 N.W. 165TH STREET

 City-St-Zip:
 WINDERMERE, FL 34786
 City-St-Zip:
 REDDICK, FL 32686

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CASSE, NORMAN E
 Name:
 DERENZO, DEAN J

 Address:
 14303 N. MAGNOLIA AVE.
 Address:
 6500 N.W. HIGHWAY 225A

City-St-Zip: CITRA, FL 32113 City-St-Zip: OCALA, FL 34482

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 DIMARE, SHEILA
 Name:
 PARKS, DIANE

 Address:
 2205 NW 110TH AVE
 Address:
 12610 NORTH US HIGHWAY 27

City-St-Zip: OCALA, FL 34482 City-St-Zip: OCALA, FL 34482

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD E. HANCOCK ED 01/04/2008