FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

N36831

(8)

FLORIDA PAINT STALLION BREEDERS ASSOCIATION, INC

Principal Place of Business	Mailing Address			in asan aran bian asan 1861
18321 N OLGA DRIVE ALVA FL 33920 US	18321 N OLGA DRIVE ALVA FL 33920		3. Date Incorporated or Qualified 02/27/1990	
US .	US		4. FEI Number 65-0166550	Applied For Not Applicable
2. Principal Place of Business 21 34455 SR 70	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State MYAKKA CITY, F	City & State		7. Is this nonprofit corporation a homeowners association? Yes No	
Zip Country 24 3 4 2 5 1 25 4 5 A	Zip 30	Country	This corporation owes or has paid the curr Personal Property Tax due June 30.	rent year Intangible ☑ Yes ☐ No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
DOPUTE PERMIS MAN		81 Name -	itsworth Ind	
ROEKEL, DENNIS VAN 18321 N OLGA DRIVE		Street Ac	34455 SR 70	
ALVA FL 33920		63		
		B4 City	YAKKA CITY FL	85 Zip Code 3 7 2 5 1

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Plorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. DATE 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition itsworth, Jud VAN ROCKEL, DENINE NALAF 1.2 NAME 18321 N OLGA DRIVE STREET ADDRESS 1.3 STREET ADDRESS 1455 SR ALVA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE TITSWORTH, JUD NAME 2.2 NAME 34455 S R 70 STREET ADDRESS 23 STREET ADDRESS MYAKKA CITY FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE DEFRESNE, JEANNE NAME 3.2 NAME 2951 N ROAD STREET ADDRESS 3.3 STREET ADDRESS N FT. MYERS FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ■ DELETE TITLE 4.1 TITLE Change Addition NULF DRAWDY, PHIL 108 26 W. MIDWAY RD STREET ADDRESS 4.3 STREET ADORESS FT PIERCE FL CITY-ST-ZIP 4.4 C/TY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE DUFRESNE, NORMAN NAME 5.2 NAME STREET ADDRESS 2951 N ROAD **5.3 STREET ADDRESS** N FT MYERS FL CITY-ST-ZIP 5.4 CiTY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE CAREY, CATHERINE NAME 6.2 NAME 4588 LONGLEAF LN STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an addition.

SARASOTA FL

SIGNATURE:

FILED

May 18 1998 8:00am

Secretary of State

0059022