

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36831

FILED
Jan 12, 2004
Secretary of State**Entity Name:** FLORIDA PAINT STALLION BREEDERS ASSOCIATION, INC.**Current Principal Place of Business:**26111 BUSH COURT
WESLEY CHAPEL, FL 33544 US**New Principal Place of Business:****Current Mailing Address:**C/O SAMI DOWNS RAY
26111 BUSH COURT
WESLEY CHAPEL, FL 33544 US**New Mailing Address:****FEI Number:** 65-0166550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, BEAR
21305 FIRETHORN RD.
EUSTIS, FL 32736 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, BEAR
Address: 21305 FIRETHORN RD.
City-St-Zip: EUSTIS, FL 32736

Title: VP () Delete
Name: BROWN, CHRIS
Address: 15871 CR 675
City-St-Zip: PARRISH, FL 34219

Title: ST () Delete
Name: RAY, SAMI DOWNS
Address: 26111 BUSH CT
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D () Delete
Name: BESUDEN, KIMBERLY
Address: 21305 FIRETHORN RD.
City-St-Zip: EUSTIS, FL 32736

Title: D (X) Delete
Name: SMITH, JAMIE
Address: P. O. BOX 371
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAMI DOWNS RAY

ST

01/12/2004

Electronic Signature of Signing Officer or Director

Date