

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR).

FILED
Feb 13, 2007 8:00 am
Secretary of State

02-13-2007 90008 042 *****70.00

DOCUMENT # N37176

1. Entity Name

**DEEP SOUTH DRESSAGE AND COMBINED TRAINING
ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

207 N MAGNOLIA AVE
OCALA FL 32670

6800 S.W. 66TH ST.
OCALA FL 34476
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

32-7255164

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PETTI, BARBARA M
6800 S.W. 66TH ST.
OCALA FL 34476**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TD
PETTI, MARIO
6800 S. W. 66TH STREET
OCALA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
BISHOP, SANDI
364 EAGLE DR
PANAMA CITY FL 32407

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
PETTI, BARBARA
6800 SW 66TH ST
OCALA FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

RUTHANNE FAINE-GARDNER
10671 N SR 53
MADISON, FL 32340-9522

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

DEEP SOUTH DRESSAGE AND COMBINED TRAINING ASSOCIATION

SIGNATURE: *Barbara M. Petti* PRESIDENT

2/2/07

352-237-3743

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #