

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N39896

FILED
Jan 20, 2011
Secretary of State

Entity Name: SOUTHERN TRAILRIDERS ASSOCIATION, INC.

Current Principal Place of Business:

5800 VETERANS MEMORIAL DR
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

5800 VETERANS MEMORIAL DR
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-3029403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOYES, SUE
5800 VETERANS MEMORIAL DR
TALLAHASSEE, FL 32309 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: SUE NOYES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: SZYMANSKI, SUSAN
Address: 12028 OTTER CREEK TRAIL
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: VP
Name: VAUSE, LINDA
Address: 8501 VETERANS MEMORIAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: PD
Name: NOYES, SUE
Address: 5800 VETERANS MEMORIAL DR
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: SEC
Name: CRUM, ALICE
Address: 173 RED FERN ROAD
City-St-Zip: HAVANA, FL 32333 US

Title: DIR
Name: FREEMAN, PAM
Address: 86 WILDFLOWER LANE
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: DIR
Name: GRANT, LYN
Address: 5017 ROBINHOOD KENNEL ROAD
City-St-Zip: TALLAHASSEE, FL 32303 US

I hereby 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 all other like empowered.

SIGNATURE: ALICE CRUM

SEC

01/20/2011

Electronic Signature of Signing Officer or Director

Date