

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2001 8:00 am**  
**Secretary of State**

09-12-2001 90107 023 \*\*\*\*61.25

**DOCUMENT # N42064**

1. Entity Name

**FLORIDA DRAFT HORSE, PONY AND MULE ASSOCIATION.**

Principal Place of Business

10840 HWY 301  
 OXFORD FL 34484  
 US

Mailing Address

P.O. BOX 281  
 OXFORD FL 34484

2. Principal Place of Business

5422 W Woodlawn St

Suite, Apt. #, etc.

3. Mailing Address

5422 W Woodlawn St

Suite, Apt. #, etc.

City & State

Dunnellon FL 34433

City & State

Dunnellon FL 34433

4. FEI Number

59-0238650

Applied For

Not Applicable

Zip

Country

34433

Citrus

Zip

Country

34433

Citrus

5. Certificate of Status Desired

☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

MUNZ, ERIN C  
 10840 HWY 301  
 OXFORD FL 34484

7. Name and Address of New Registered Agent

Name

Marilyn Kent

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

5422 W Woodlawn St

City

Dunnellon

FL

Zip Code  
 34433

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.

SIGNATURE Marilyn Kent Sec/Treas.

9-10-01

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**  
**After September 12, 2001, min. will be \$236.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

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

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

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete  
 NAME NEVERS, MIKE  
 STREET ADDRESS 3207-CR721  
 CITY-ST-ZIP WEBSTER FL

TITLE V ☒ Delete  
 NAME WALLICK, JOHN  
 STREET ADDRESS 4403 COATS RD  
 CITY-ST-ZIP ZEPHYRHILLS FL

TITLE ST ☒ Delete  
 NAME MUNZ, ERIN C  
 STREET ADDRESS P.O. BOX 281  
 CITY-ST-ZIP OXFORD FL 34484

TITLE D ☐ Delete  
 NAME KENT, VIC  
 STREET ADDRESS 5422 W. WOODLAWN ST.  
 CITY-ST-ZIP DUNNELLON FL 33433

TITLE D ☒ Delete  
 NAME HARRIS, RON  
 STREET ADDRESS RT. 2, BOX 2065  
 CITY-ST-ZIP TRENTON FL

TITLE ☒ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Change ☐ Addition  
 NAME Gary Moe  
 STREET ADDRESS 10410 W Hwy 40  
 CITY-ST-ZIP Ocala FL 34482

TITLE VP ☐ Change ☐ Addition  
 NAME TerryYoder  
 STREET ADDRESS 5032 NW 40th St  
 CITY-ST-ZIP Lake Panasoffkee FL 33538

TITLE S/T ☐ Change ☐ Addition  
 NAME MARILYN Kent  
 STREET ADDRESS 5422 W Woodlawn St  
 CITY-ST-ZIP Dunnellon FL 34433

TITLE D ☐ Change ☐ Addition  
 NAME Mike Nevers  
 STREET ADDRESS 3207 CR 721  
 CITY-ST-ZIP Webster FL 33597

TITLE D ☐ Change ☐ Addition  
 NAME Red Perry  
 STREET ADDRESS 2842 SE 21st Ave  
 CITY-ST-ZIP Sumterville FL 33585

TITLE D ☐ Change ☐ Addition  
 NAME Bernie Hefner  
 STREET ADDRESS 1100 NE 120th St  
 CITY-ST-ZIP Ocala FL 34470

12. 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 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.

SIGNATURE:

*Marilyn Kent Sec/Treas.*

9-10-01

352-465-577

CR2E037 (5/01)