# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 16, 2007**
**Secretary of State**

DOCUMENT# N46228

**Entity Name:** SOUTHEASTERN PERUVIAN HORSE CLUB, INC.

**Current Principal Place of Business:**

2817 SW 186TH ST.
NEWBERRY, FL 32669 US

**New Principal Place of Business:**

**Current Mailing Address:**

2817 SW 186TH ST.
NEWBERRY, FL 32669 US

**New Mailing Address:**

**FEI Number: 59-3111417** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

HARRISON, LORI
2817 SW 186 STREET
NEWBERRY, FL 32669 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: VP ( ) Delete
Name: GANDY, EDITH
Address: PO BOX 866
City-St-Zip: ANTHONY, FL 32617

Title: S ( ) Delete
Name: BOKDEN, CAROL
Address: 8090 NW 120TH ST
City-St-Zip: REDDICK, FL 32686 US

Title: T ( ) Delete
Name: HAWKINS, MARYLOU
Address: 198 SW OAK GLEN
City-St-Zip: FORT WHITE, FL 32038 US

Title: D ( ) Delete
Name: HARGROVE, NANCY
Address: 10522 S. HWY 441
City-St-Zip: MICANOPY, FL 32667 US

Title: P ( ) Delete
Name: MALPARTIDA, CARLOS
Address: 11906 NW 27TH PLACE
City-St-Zip: ALACHUA, FL 32615 US

Title: D ( ) Delete
Name: GRANT, GLORIA
Address: 5393 PAINTED PONY AVE.
City-St-Zip: MELROSE, FL 32666

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition
Name: GANDY, EDITH
Address: PO BOX 866
City-St-Zip: ANTHONY, FL 32617 US

Title: VP (X) Change ( ) Addition
Name: RODRIGUEZ, ANGEL
Address: 715 KIRKPATRICK RD
City-St-Zip: COCHRAN, GA 31014 US

Title: S/T (X) Change ( ) Addition
Name: HARRISON, LORI
Address: 2817 SW 186TH ST.
City-St-Zip: NEWBERRY, FL 32669 US

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

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

Title: D (X) Change ( ) Addition
Name: GRANT, GLORIA
Address: 5393 PAINTED PONY AVE.
City-St-Zip: MELROSE, FL 32666 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LORI A. HARRISON S/T 05/16/2007

Electronic Signature of Signing Officer or Director — Date