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May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N49905 (5)

1. Corporation Name

THE EVERGLADES EQUESTRIAN SOCIETY, INC.



Principal Place of Business

Mailing Address

640 DORANDO COURT
MARCO ISLAND FL 33937
US

640 DORANDO COURT
MARCO ISLAND FL 34145-1912
US

3. Date Incorporated or Qualified
07/16/1992

3a. Date of Last Report
02/19/1996

2. Principal Place of Business

2a. Mailing Address

21 4250 25th Ave. S.W.
Suite, Apt. #, etc.

26 3013 Rum Row
Suite, Apt. #, etc.

4. FEI Number

59-3127863

Applied For

Not Applicable

22 City & State

23 Naples, FL
Zip Country

27 City & State

28 Naples, FL
Zip Country

5. Certificate of Status Desired

8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

5.00 May Be Added to Fees

24

25

29

30

33940

US

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KATELEY, KAREN
826 101ST AVENUE NORTH
NAPLES FL 33963

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **P** OSSORIO, GRAEME
STREET ADDRESS 4250 25TH AVE. S.W.
CITY-ST-ZIP NAPLES FL

1.1 TITLE Change Addition
1.2 NAME **B. J. Gerald**
1.3 STREET ADDRESS **Cross Creek Sport Horses**
1.4 CITY-ST-ZIP **19300 Turkey Run Lane**
ALVA, FL 33920

TITLE DELETE
NAME **P** BRAREN, ROBERT
STREET ADDRESS **640 DORANDO CT.**
CITY-ST-ZIP **NAPLES FL 33937**

2.1 TITLE Change Addition
2.2 NAME **Dean Eby**
2.3 STREET ADDRESS **3530 Stuart Ct.**
2.4 CITY-ST-ZIP **Ft. Myers, FL 33901**

TITLE DELETE
NAME **T** KATELEY, KAREN
STREET ADDRESS 826 101ST AVE., NORTH
CITY-ST-ZIP NAPLES FL 33963

3.1 TITLE Change Addition
3.2 NAME **D Debbie Liffig**
3.3 STREET ADDRESS **12734 Kenwood Lane, Suite 60**
3.4 CITY-ST-ZIP **Ft. Myers FL 33907-5638**

TITLE DELETE
NAME **D** ~~BIXON, SUE~~
STREET ADDRESS ~~6544 DANIELS ROAD~~
CITY-ST-ZIP ~~NAPLES FL 33990~~

4.1 TITLE Change Addition
4.2 NAME **D Kate Sanders**
4.3 STREET ADDRESS **17840 Palm Creek Drive**
4.4 CITY-ST-ZIP **N. Ft. Myers FL 33917**

TITLE DELETE
NAME **D** CARNES, PATTY
STREET ADDRESS 345 MEADOW LARK COURT
CITY-ST-ZIP MARCO ISLAND FL 33937

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME **D** FALKING, JOYCE
STREET ADDRESS 28040 WESTBROOK DR.
CITY-ST-ZIP BONITA SPRINGS FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Karen Liffig
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/97
Date

Daytime Phone # 0000000

CR2E037 (9/96)