

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001351

FILED  
Apr 15, 2007  
Secretary of State

**Entity Name:** FLORIDA REINING HORSE ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 770190  
OCALA, FL 34477 US

**New Principal Place of Business:**

3284 CR 218  
MIDDLEBURG, FL 32068 US

**Current Mailing Address:**

P.O. BOX 770190  
OCALA, FL 34477 US

**New Mailing Address:**

**FEI Number:** 65-0399785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOND, ROBERT  
3284 CR 218  
MIDDLEBURG, FL 32068 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: PD ( ) Delete  
Name: CONNOR, CARMEL  
Address: 10401 NW 60TH AVE  
City-St-Zip: OCALA, FL 34482

Title: VP ( ) Delete  
Name: BOND, ROBERT  
Address: 3284 CR 218  
City-St-Zip: MIDDLEBURG, FL 32068

Title: DVP ( ) Delete  
Name: CONNOR, CARMEL  
Address: 10401 NW 60TH AVE  
City-St-Zip: OCALA, FL 34482

Title: TRSR ( ) Delete  
Name: BOND, ROBERT  
Address: 3284 CR 218  
City-St-Zip: MIDDLEBURG, FL 32068

Title: T ( ) Delete  
Name: DRAWDY, THERESA  
Address: 4500 MILDRED BASS ROAD  
City-St-Zip: SAINT CLOUD, FL 34772

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

Title: PD (X) Change ( ) Addition  
Name: BOND, ROBERT  
Address: 3284 CR 218  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D (X) Change ( ) Addition  
Name: ROSI, JOHN  
Address: 3483 SYLVANIA PLANTATION ROAD  
City-St-Zip: GREENWOOD, FL 32443

Title: PP (X) Change ( ) Addition  
Name: CONNOR, CARMEL  
Address: 10401 NW 60TH AVE  
City-St-Zip: OCALA, FL 34482

Title: D (X) Change ( ) Addition  
Name: MABE, JANE  
Address: 9990 NE 33RD AVE.  
City-St-Zip: ANTHONY, FL 32617

Title: TRSR (X) Change ( ) Addition  
Name: DRAWDY, THERESA  
Address: 4500 MILDRED BASS ROAD  
City-St-Zip: SAINT CLOUD, FL 34772

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT BOND

PD

04/15/2007

Electronic Signature of Signing Officer or Director

Date