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NONPROFIT CORPORATION ANNUAL REPORT

1996



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

## DOCUMENT # N9300002639 (3)

VIL 7 L	R SPURS SADDLE CLUB,	INC.					
Principal Place	e of Business	Mailing Address			E ARRENTON BLU LORDO FININ BOURT OFFI	ADIN BRIN OBILD HOLD EX	
708 WENDEL AVE LITHIA FL 33547		708 WENDEL AVE LITHIA FL 33547		i			
					3. Date Incorporated or Qualified 06/08/1993	3a. Date of Las 05/01/	st Report 1995
2. Principal Pl	lace of Business	2a. Mailing Address 26			4. FEI Number NOT APPLICABLE		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$0.7	Not Applicab  5 Additional
		27			Certificate of Status Desired	, , , , , , , , , , , , , , , , , , , ,	Pequired
City & State	0	City & State			6. Election Campaign Financing	\$5.0	00 May Be
Zip	Country	28 Zip	Country		Trust Fund Contribution	Add	ed to Fees
ָּה. ק	25	29	30		8. This corporation has liability for i	intangible tax under s □ Yes □ No	s. 199.032,
	9 Name and Address of Curr	ent Registered Agent		1	10. Name and Address of New R		
0011010	NOV BIOURY B		81 N	Varne			
	ick, rickey d Ndel ave		<b>82</b> S	Street Address	(P.O. Box Number is Not Acceptable	le)	<del></del>
LITHIA FI			83				
unio n	L 3007/		63				
			<b>84</b> C	City		FL 85 Z	ip Code
					and the section of th	noon of changing its	registered off
familiar wit	to the provisions of Sections 617.05 red agent, or both, in the State of Fig. th, and accept the obligations of, Se	ection 617.0503, Florida Statutes	ed by the corpora:	tion's board o	on submits this statement for the purple for the appoint of the appoint in the ap	ointment as registered	d agent. I am
familiar wit	th, and accept the obligations of, Se	ection 617.0503, Florida Statutes  Color of the It applicable (NC)	ed by the corpora:	tion's board o	of directors. Thereby accept the apportunity	DATE 4-2-	d agent. I am
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familiar wit GNATURE _ LE	th, and accept the obligations of, Se  Signature, upid or printed name of registered ag-  OFFICERS A	ection 617.0503, Florida Statutes  Color of the It applicable (NC)	TE Registered Agent sign 13.	I (v C K	or directors. Thereby accept the appointment of the composition of the	DATE  CERS AND DIRECTO	d agent. I am
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NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dat