

N9500001776



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 14, 1995

CSC NETWORK
ATTN: LORI
TALLAHASSEE, FL 32301

SUBJECT: SMITH'S CENTER FOR THERAPEUTIC RIDING, INC.

This letter will confirm that due to a clerical error the above referenced corporation was incorrectly filed as a PROFIT corporation. Please be advised, we have corrected our records to reflect this corporation as a NON-PROFIT corporation and assigned new document number N9500001776 with the original file date of November 7, 1994.

Any annual reports submitted this office should reflect the new document number.

We sincerely apologize for any inconvenience this error may have caused you.

Should you have any questions please feel free to contact this office at the address indicated below.

Sincerely,
Doris McDuffie
Corporate Specialist Supervisor
New Filings Section

Letter number: 095A00017220

CORPORATION INFORMATION
SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32311
904 222-9171
904 222-0191 FAX

CSO networks

Mail To:
P.O. Box 5020
Tallahassee, FL 32311

ACCOUNT NO. : 072100000032

REFERENCE : 484695 3487A

AUTHORIZATION : *Pattusia Pyatt*

COST LIMIT : \$ 122.50

ORDER DATE : November 7, 1994

ORDER TIME : 10:37 AM

ORDER NO. : 484695

CUSTOMER NO: 3487A

CUSTOMER: Troy Myers, Esq
ICARD MERRILL CULLIS TIMM
FUREN & GINSBURG, PA
2033 Main Street, Suite 600
P. O. Drawer 4195
Sarasota, FL 34237

DOMESTIC FILING

P94000081733

NAME: SMITH'S CENTER FOR THERAPEUTIC
RIDING, INC.

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea Hamilton

EXAMINER'S INITIALS: *(H, same)*

11-8-94
02/A

ARTICLES OF INCORPORATION
OF
SMITH'S CENTER FOR THERAPEUTIC RIDING, INC.

FILED

1996 NOV -7 14 9 56

SECRET
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby executes these Articles for the purpose of forming a Corporation not for profit under the laws of the State of Florida, by and under the provisions of the statutes of the State of Florida, providing for the formation, liability, rights, privileges and immunities of a Corporation not for profit.

ARTICLE I

NAME OF CORPORATION

The name of this Corporation shall be Smith's Center for Therapeutic Riding, Inc. hereafter referred to as the Corporation.

ARTICLE II

PRINCIPAL OFFICE

The principal office of the corporation shall initially be at 231 S. Tamiami Trail, Nokomis, Florida 34275. The corporation may change its principal office from time to time as permitted by law.

ARTICLE III

EXISTENCE

This Corporation shall exist perpetually unless dissolved according to law.

ARTICLE IV

PURPOSE OF BUSINESS

The general nature of the business to be conducted by the Corporation shall be to provide therapy, train therapy horses, train therapists in hippotherapy (medical treatment for persons

with movement dysfunction) and instructors in riding therapy, as well as such other purposes as may be allowed under the Florida Statutes. The purposes for which the corporation is organized are exclusively religious, charitable, scientific, literary or educational within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

ARTICLE V

POWERS

The Corporation shall have all of the statutory powers of a Corporation not for profit as provided under the Florida Statutes, as amended from time to time, except as may be limited or otherwise provided by these Articles. Notwithstanding any other provisions of these articles, this organization shall not carry on any activities not permitted to be carried on by an organization exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provision of any future United States Internal Revenue law.

ARTICLE VI

MEMBERS

Membership shall be as determined under the Bylaws of the Corporation.

ARTICLE VII

REGISTERED OFFICE AND REGISTERED AGENT

The registered office of the Corporation shall be at 2033 Main Street, Suite 600, Sarasota, Florida 34237 and the registered agent

at such address shall be ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A., Attention: Troy H. Myers Jr.

ARTICLE VIII

NUMBER OF DIRECTORS

The business of the Corporation shall be conducted by a board of directors. The number of directors shall be determined by resolution of the membership of the Corporation, but shall not be less than three. The following directors shall constitute the original board of directors. Directors shall be elected or appointed as provided in the Bylaws. The names of the initial directors of this Corporation are:

<u>NAME</u>	<u>ADDRESS</u>
Mary Nاستان	2278 Black Oak Court Sarasota, Florida
John Struth	2002 Mattison Drive Palm Bay, Florida
Richard Nاستان	2278 Black Oak Court Sarasota, Floirda

ARTICLE IX

INCORPORATOR

The name and address of the incorporator is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Troy H. Myers Jr.	2033 Main Street, Suite 600 Sarasota, Florida 34237

ARTICLE X

INDEMNIFICATION OF OFFICERS AND DIRECTORS

All officers and directors shall be indemnified by the

Corporation against all expenses and liabilities including counsel fees (including appellate proceedings) reasonably incurred in connection with any proceeding or settlement of it in which they may become involved by reason of holding their office, other than proceedings or claims resulting from willful misconduct or bad faith. The Corporation may purchase and maintain insurance on behalf of all officers and directors against such liability asserted against them or incurred by them in their capacity as officers and directors or arising out of that status.

ARTICLE XI

BYLAWS

The first bylaws of the Corporation shall be adopted by the board of directors and may be altered, amended or rescinded by majority vote of the voting rights of the members.

ARTICLE XII

AMENDMENTS

The Corporation reserves the right to amend, alter, change or repeal any provisions contained in these Articles of Incorporation by a simple majority vote of all voting rights of all members of the Corporation and all rights here conferred upon the members are granted subject to this reservation.

ARTICLE XIII

DISSOLUTION

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding


section of any future federal tax code, or shall be distributed to the Federal, state, or local government for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organizations then located, exclusively for such purposes.

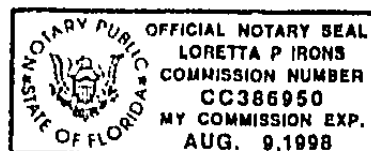
The undersigned Incorporator has executed these Articles of Incorporation on the 3rd day of November, 1994.


Troy H. Myers Jr.

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 3rd day of November, 1994, by Troy H. Myers Jr., who is personally known to me and who did not take an oath.


Notary Public
State of Florida at Large
My Commission Expires:




ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT FOR

FILED
1994 NOV -7 PM 9 55
SECRET
TALLAHASSEE FL 32301

Having been named to accept service of process for the above stated Corporation, at the place designated in the Corporation's articles of incorporation, the undersigned hereby acknowledges and accepts the appointment and agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties.

DATED: November 3, 1994

ICARD, MERRILL, CULLIS, TIMM,
FUREN & GINSBURG, P.A.

By: 
Troy H. Myers Jr.
Its authorized agent

Registered Agent

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N9500001776



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

7-0266
April 14, 1995

CSC NETWORK
ATTN: LORI
TALLAHASSEE, FL 32301

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AUTHORIZATION :

Patricia Pysit

COST LIMIT : \$ 122.50

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ORDER TIME : 10:37 AM

400001028864

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CUSTOMER NO: 3487A

CUSTOMER: Troy Myers, Esq
ICARD MERRILL CULLIS TIMM
FUREN & GINSBURG, PA
2033 Main Street, Suite 600
P. O. Drawer 4195
Sarasota, FL 34237

DOMESTIC FILING

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CONTACT PERSON: Andrea Hamilton

EXAMINER'S INITIALS:

(R, same)
Im

11-8-94
02/A

FILED
NOV -7 AM 9 54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF
SMITH'S CENTER FOR THERAPEUTIC RIDING, INC.

FILED

1994 NOV -7 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VIII

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The business of the Corporation shall be conducted by a board of directors. The number of directors shall be determined by resolution of the membership of the Corporation, but shall not be less than three. The following directors shall constitute the original board of directors. Directors shall be elected or appointed as provided in the Bylaws. The names of the initial directors of this Corporation are:

<u>NAME</u>	<u>ADDRESS</u>
Mary Natan	2278 Black Oak Court Sarasota, Florida
John Struth	2002 Mattison Drive Palm Bay, Florida
Richard Natan	2278 Black Oak Court Sarasota, Florida

ARTICLE IX

INCORPORATOR

The name and address of the incorporator is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Troy H. Myers Jr.	2033 Main Street, Suite 600 Sarasota, Florida 34237

ARTICLE X

INDEMNIFICATION OF OFFICERS AND DIRECTORS

All officers and directors shall be indemnified by the

Corporation against all expenses and liabilities including counsel fees (including appellate proceedings) reasonably incurred in connection with any proceeding or settlement of it in which they may become involved by reason of holding their office, other than proceedings or claims resulting from willful misconduct or bad faith. The Corporation may purchase and maintain insurance on behalf of all officers and directors against such liability asserted against them or incurred by them in their capacity as officers and directors or arising out of that status.

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ARTICLE XIII

DISSOLUTION

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding


section of any future federal tax code, or shall be distributed to the Federal, state, or local government for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the organizations then located, exclusively for such purposes.

The undersigned Incorporator has executed these Articles of Incorporation on the 3rd day of November, 1994.


Troy H. Myers Jr.

STATE OF FLORIDA
COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 3rd day of November, 1994, by Troy H. Myers Jr., who is personally known to me and who did not take an oath.


Notary Public
State of Florida at Large
My Commission Expires:




ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT FOR

FILED
1994 NOV -7 AM 9 55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named to accept service of process for the above stated Corporation, at the place designated in the Corporation's articles of incorporation, the undersigned hereby acknowledges and accepts the appointment and agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of its duties.

DATED: November 3, 1994

ICARD, MERRILL, CULLIS, TIMM,
FUREN & GINSBURG, P.A.

By: 
Troy H. Myers Jr.
Its authorized agent

Registered Agent

F:\USERS\THM\THMC\WPS\SCTR.AI

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Teresa B. Martinez
Secretary of State
DESIGNATED OFFICE: TALLAHASSEE

DOCUMENT # N95000001776 (2)
To: Corporation Name

SMITH'S CENTER FOR THERAPEUTIC RIDING, INC.

95 JUL 25 AM 9:09

Principal Place of Business

Mailing Address

231 S TAMiami TRAIL
NOKOMIS FL 34275

231 S TAMiami TRAIL
NOKOMIS FL 34275

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

3a. Date of Last Report

11/07/1994

4. FIC Number

650536169

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

FILING FEE IS
\$61.25

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. # etc.

2b. State, Apt. # etc.

22. City & State

27. City & State

23. Zip

25. Country

28. Zip

30. Country

9. Name and Address of Current Registered Agent

ICARD MERRILL CULLIS TIMM FUREN GINSBURG
ATTN: TROY H. MYERS, JR.
2033 MAIN STREET SUITE 600
SARASOTA FL 34237

10. Name and Address of New Registered Agent

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 617.1504, 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 of Agent or person authorized to accept appointment as registered agent

Signature of Registered Agent or person authorized to accept appointment as registered agent

(Date)

12. OFFICERS AND DIRECTORS

TITLE
NAME
D NASTAN, MARY
STREET ADDRESS
2278 BLACK OAK COURT
CITY, ST, ZIP
SARASOTA FL

TITLE
NAME
D STRUTH, JOHN
STREET ADDRESS
2002 MATTISON DR
CITY, ST, ZIP
PALM BAY FL

TITLE
NAME
D NASTAN, RICHARD
STREET ADDRESS
2278 BLACK OAK COURT
CITY, ST, ZIP
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If 0)

11. TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY, ST, ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY, ST, ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY, ST, ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY, ST, ZIP

71. TITLE

72. NAME

73. STREET ADDRESS

74. CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), 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 effect as if made under oath that I am an officer or director of the corporation or the person or trustee empowered to execute the report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. I am an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary L. Nastan

7-17-95

941-4842426