2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N95000003069

Entity Name: SOUTH CREEK EQUESTRIAN CLUB, INC.

Current Principal Place of Business:

101 E. KENNEDY BLVD.
SUITE 3300
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

101 E. KENNEDY BLVD.
SUITE 3300
TAMPA, FL 33602

New Mailing Address:

FEI Number: 59-3316237 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MICHAELS, J PATRICK JR
51M S NICOL STREET
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

MICHAELS, J PATRICK JR
5117 S NICOL STREET
TAMPA, FL 33611 US

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: _____ 04/07/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WILLIAMS, LINDA T
Address: 8916 EAGLE WATCH DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete
Name: MICHAELS, J. PATRICK JR.
Address: 5117 S NICOL STREET
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: PHETHEAN, BARBARA
Address: 27131 JOHNSON ROAD
City-St-Zip: DADE CITY, FL 33523

Title: D ( ) Delete
Name: FERRARO, MICHAEL
Address: 5959 JAEGER GLEN DRIVE
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LINDA T. WILLIAMS D 04/07/2009
Electronic Signature of Signing Officer or Director — Date