

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001396

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** FLORIDA AGRICULTURE CENTER AND HORSE PARK AUTHORITY, INC.

**Current Principal Place of Business:**

11008 SOUTH HWY 475  
OCALA, FL 34480 US

**New Principal Place of Business:**

**Current Mailing Address:**

11008 SOUTH HWY 475  
OCALA, FL 34480 US

**New Mailing Address:**

**FEI Number:** 59-3371901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, FRED N ATTORNE  
333 N.W. 3RD AVENUE  
OCALA, FL 34475 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: CD ( ) Delete  
Name: PALMER, WHITFIELD M JR.  
Address: PO BOX 367  
City-St-Zip: OCALA, FL 34478 US

Title: VCD ( ) Delete  
Name: BACHRODT, CRAIG  
Address: 2300 SW COLLEGE RD.  
City-St-Zip: OCALA, FL 34474 US

Title: SD ( ) Delete  
Name: PETTY, TIMOTHY  
Address: 10084 NW 225A  
City-St-Zip: OCALA, FL 34482 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: CD (X) Change ( ) Addition  
Name: DUFF WISE, CONNIE  
Address: 270 CAMPBELL AVE.  
City-St-Zip: THE VILLAGES, FL 32162 US

Title: VCD1 (X) Change ( ) Addition  
Name: DUNN, CECILE  
Address: 2935 GRIFFIN AVE.  
City-St-Zip: LADY LAKE, FL 32159 US

Title: VCD2 (X) Change ( ) Addition  
Name: BACHRODT, CRAIG  
Address: 2300 SW COLLEGE RD  
City-St-Zip: OCALA, FL 34471 US

Title: TR ( ) Change (X) Addition  
Name: GUTHRIE, DAMIAN  
Address: 17004 NW HWY 225  
City-St-Zip: REDDICK, FL 32686 US

Title: SEC ( ) Change (X) Addition  
Name: WEBER, CHESTER  
Address: 9275 SW 9TH ST. RD.  
City-St-Zip: OCALA, FL 34481 US

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: CJ MARCELLO, JR.

ED

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date