

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001660

1. Entity Name

SOUTHERN DRAFT HORSE ASSOCIATION, INC.

FILED
Jan 14, 2000 8:00 am
Secretary of State

01-14-2000 90015 050 ****61.25

Principal Place of Business Mailing Address
36600 MICRO RACETRACK RD 36600 MICRO RACETRACK RD
FRUITLAND PARK FL 34731 FRUITLAND PARK FL 34731-5130

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3480538**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CERGIZAN, FRANCIS E
2502 E ORANGE AVE
EUSTIS FL 32726

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
NAME **CHRISTENSON, RICHARD**
STREET ADDRESS **36600 MICRO RACETRACK RD**
CITY-ST-ZIP **FRUITLAND PARK FL 34731**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **DEARING, DALE**
STREET ADDRESS **9939 ROCKRIDGE RD**
CITY-ST-ZIP **LAKELAND FL 33810**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **PERRY, DALE**
STREET ADDRESS **2842 SE 21ST AVE**
CITY-ST-ZIP **SUMTERVILLE FL 33585**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ROBERTSON, JIM**
STREET ADDRESS **3204 SE 34 CT**
CITY-ST-ZIP **OCALA FL 34471**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DT** ☐ Delete
NAME **CHRISTENSON, MARY**
STREET ADDRESS **36600 MICRO RACETRACK RD**
CITY-ST-ZIP **FRUITLAND PARK FL 34731**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **DEWITT, FRANCIS**
STREET ADDRESS **85 EASTON ST**
CITY-ST-ZIP **GRANBY MA 01033**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Francis E. Christenson, Treas.*

1-7-2000 (352)323-1866

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #