

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Apr 02 1998 8:00am
Secretary of State

DOCUMENT # N97000001777 (8)

1. Corporation Name

WELLINGTON EQUESTRIAN ALLIANCE, INC.



Principal Place of Business

Mailing Address

C/O WILLIAM H. SNED, JR., ESO.
218 DATURA STREET
WEST PALM BEACH FL 33401

C/O WILLIAM H. SNED, JR., ESO.
218 DATURA STREET
WEST PALM BEACH FL 33401

3. Date Incorporated or Qualified

03/26/1997

4. FEI Number

58-2331172

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 14440 PIERSON ROAD
Suite, Apt. #, etc.

26 14440 PIERSON ROAD
Suite, Apt. #, etc.

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

City & State

City & State

23 WELLINGTON, FL

28 WELLINGTON, FL

Zip

Country

24 33414

25 USA

Zip

Country

29 33414

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SNED, JR., WILLIAM H ESO.
BRACKETT, SNED, WELCH, D'ANGIO, ET AL, P A
218 DATURA STREET
WEST PALM BEACH FL 33401

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 617.1508, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PVPD
NAME SPEARS, DIANE C
STREET ADDRESS C/O 218 DATURA STREET
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME SNED, WILLIAM H JR.
STREET ADDRESS C/O 218 DATURA STREET
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME FARACH, MANUEL
STREET ADDRESS C/O 218 DATURA STREET
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ernest R. Mischke* *Ernest R. Mischke* 4/30/98 561-793-5867

CR2E037 (10/97)

WELLINGTON EQUESTRIAN ALLIANCE, INC.
FORM CR2E037 - NON PROFIT CORPORATION ANNUAL REPORT - 1998
ATTACHMENT

LINE 12 - OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVPD SPEARS, DIANE C C/O 218 DATURA STREET WEST PALM BEACH FL 33401 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD MISCHE, EUGENE 14440 PIERSON ROAD WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SNED, WILLIAM H JR. C/O 218 DATURA STREET WEST PALM BEACH FL 33401 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	VPD GOODMAN, J. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FARACH, MANUEL C/O 218 DATURA STREET WEST PALM BEACH FL 33401 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VPD DOVER, R. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	SD ABEDON, R. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	TD HIRSCH, NS 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	D ARGUETTY, I. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	D BANKS, G. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	D CURRY, A. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	D JACOBS, J. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	D LLOYD, F. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	D SILVERMAN, L. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	D SWEENEY, D. 14440 PIERSON ROAD WELLINGTON, FL 33414 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

CR2E037 (11/97)