

FILED  
Jun 13, 2003 8:00 am  
Secretary of State

05-01-2003 90760 046 \*\*\*\*61.25

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N97000001777

1. Entity Name

WELLINGTON EQUESTRIAN ALLIANCE, INC.



Principal Place of Business

14440 PIERSON ROAD  
WELLINGTON FL 33414  
US

Mailing Address

14440 PIERSON ROAD  
WELLINGTON FL 33414  
US

55048014

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 58-2331172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MISCHE, EUGENE  
1301 SIXTH AVE WEST  
STE. 408  
BRADENTON FL 34205

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME MISCHE, EUGENE  
STREET ADDRESS 1301 SIXTH AVE W STE. 408  
CITY-ST-ZIP BRADENTON FL 34205 *D EPM*

TITLE D  
NAME JACOBS, JEREMY  
STREET ADDRESS 1300 NORTH DAVIS RD  
CITY-ST-ZIP EAST AURORA NY 14052 *D EPM*

TITLE D  
NAME BANKS, GEORGE  
STREET ADDRESS 13808 FAIRLANE CT  
CITY-ST-ZIP WELLINGTON FL 33414 *D EPM*

TITLE D  
NAME LLOYD, FRANK  
STREET ADDRESS 68 THUNDERHEAD PL  
CITY-ST-ZIP MAHWAH NJ 07430 *D EPM*

TITLE D  
NAME HIRSCH, NEIL  
STREET ADDRESS 14440 PIERSON ROAD  
CITY-ST-ZIP WELLINGTON FL 33414 *D EPM*

TITLE D  
NAME CURRY, AGNETA  
STREET ADDRESS 1115 SNEED RD RT 12  
CITY-ST-ZIP FRANKLIN TN 37064 *D EPM*

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP  
NAME WILLIAM YLVISAKER *D EPM*  
STREET ADDRESS 14440 PIERSON RD  
CITY-ST-ZIP WELLINGTON, FL 33414 ☐ Change ☒ Addition

TITLE ST  
NAME MICHAEL WHITLOW *D EPM*  
STREET ADDRESS 14440 PIERSON RD  
CITY-ST-ZIP WELLINGTON, FL 33414 ☐ Change ☒ Addition

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/23/03

Date

941-744-5461

Daytime Phone #

CR2E037 (10/02)