

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004646

FILED
Feb 07, 2012
Secretary of State

Entity Name: MARION COUNTY HORSEMAN'S ASSOCIATION, INC.

Current Principal Place of Business:

2232 NE JACKSONVILLE RD
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 76
OCALA, FL 344780076 US

New Mailing Address:

FEI Number: 59-3652597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LENINGTON, KATE
5198 SW 140TH AVE
OCALA, FL 34481 US

Name and Address of New Registered Agent:

BRYANT, DIANNE
15494 NE JACKSONVILLE RD
CITRA, FL 32113 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: DIANNE BRYANT

02/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: FLAMAN, CATHERINE
Address: 14970 SE 80 TH AVE
City-St-Zip: SUMMERFIELD, FL 34491

Title: DVP
Name: GARVIN, JAN
Address: 1283 NE 120TH ST
City-St-Zip: OCALA, FL 34479

Title: DS
Name: RAFFERTY, MARE
Address: 7955 SW 72ND CT
City-St-Zip: OCALA, FL 34476

Title: DT
Name: BRYANT, DIANNE
Address: 15494 NE JACKSONVILLE RD
City-St-Zip: CITRA, FL 32113

I hereby 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 all other like empowered.

SIGNATURE: DIANNE BRYANT

DT

02/07/2012

Electronic Signature of Signing Officer or Director

Date