2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004874

FILED Jan 04, 2008 Secretary of State

Entity Name: THE FLORIDA THOROUGHBRED BREEDERS' AND OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

801 SW 60TH AVENUE OCALA, FL 34474

Current Mailing Address: New Mailing Address:

801 SW 60TH AVENUE OCALA, FL 34474

FEI Number: 59-0944678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANCOCK, RICHARD E 801 SW 60TH AVENUE OCALA, FL 34474

OFFICERS AND DIRECTORS:

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:

Title:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

() Delete (X) Change () Addition

DIZNEY, DONALD R MARTIN, EDDIE Name: Name:

603 MAIN STREET Address: 3900 N.W. 165TH STREET Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: REDDICK, FL 32686

Title: () Delete Title: () Change () Addition

ROBERTS, MARK Name: Name: Address: 14216 N US HWY 27 Address: City-St-Zip: OCALA, FL 34482 City-St-Zip:

Title: 2VPD () Delete Title: () Change () Addition

DERENZO, DEAN J Name: Name: 6500 NW HWY 225A Address: Address: City-St-Zip: OCALA, FL 34482 City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: DIMARE, SHEILA Name: PARKS, DIANE 2205 NW 110TH AVENUE 12610 NORHT US HIGHWAY 27 Address: Address:

City-St-Zip: OCALA, FL 34482 City-St-Zip: OCALA, FL 34482

Title: VPD () Delete Title: (X) Change () Addition Name:

CAMPBELL, GILBERT G CAMPBELL, GILBERT G Name: Address: P.O. BOX 381 Address: P.O. BOX 381

City-St-Zip: TYNGSBORO, MA 01879 City-St-Zip: TYNGSBORO, MA 01879

() Delete HANCOCK, RICHARD E Name: Name: Address: 801 SW 60TH AVE Address: OCALA, FL 34474 City-St-Zip: City-St-Zip:

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.

Title:

SIGNATURE: RICHARD E. HANCOCK ED 01/04/2008