

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90214 004 ****70.00

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1. Entity Name
HAMILTON COUNTY RIDING CLUB, INC.



Principal Place of Business
LYNN LAKE ROAD
JASPER, FL 32052 US

Mailing Address
P.O. BOX 907
JASPER, FL 32052 US

40001310



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04292006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
59-3480536

Applied For
Not Applicable

Zip

Country

Zip

Country

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

PARALEGAL & ATTORNEY SERVICE BUREAU, INC.
1406 HAYS ST
SUITE 2
TALLAHASSEE, FL 32031

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 (loop cable)

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME BUTLER, JOHNNY
STREET ADDRESS CR 146
CITY-ST-ZIP JENNINGS, FL 32053

TITLE President ☐ Change ☒ Addition
NAME Jan Kinsey
STREET ADDRESS Loch Laurel Rd
CITY-ST-ZIP Lake Park Ga 31634

TITLE VPD ☒ Delete
NAME KINSEY, JAN
STREET ADDRESS LOCK LAUREL RD
CITY-ST-ZIP LAKE PARK, GA 31636

TITLE Vice President ☐ Change ☒ Addition
NAME Cindy Eatmon
STREET ADDRESS Watley Street
CITY-ST-ZIP Jasper FL 32052

TITLE T ☐ Delete
NAME ROWE, CAROL L
STREET ADDRESS 4941 NW 44TH ST
CITY-ST-ZIP JENNINGS, FL 32053

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

TITLE SD ☒ Delete
NAME MILLER, JESSICA
STREET ADDRESS SR 4
CITY-ST-ZIP JASPER, FL 32052

TITLE Secretary ☐ Change ☒ Addition
NAME Terri Low
STREET ADDRESS Loch Laurel Rd
CITY-ST-ZIP Lake Park Ga 31636

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemptions contained 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 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:

Carol L. Rowe

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/06 229-671-2023