

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005011

FILED  
Jan 26, 2012  
Secretary of State

**Entity Name:** HAMILTON COUNTY RIDING CLUB, INC.

**Current Principal Place of Business:**

165 ROBIN AVE SW  
JASPER, FL 32052 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 907  
JASPER, FL 32052 US

**New Mailing Address:**

**FEI Number:** 59-3480536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TUCKER, EDDIE  
Address: 5793 87TH TERRACE SW  
City-St-Zip: JASPER, FL 32052

Title: T  
Name: DANIELS, MAUREEN  
Address: 7082 STATE ROAD 6 WEST  
City-St-Zip: JASPER, FL 32052

Title: VP  
Name: WETHERINGTON, LINDA  
Address: 2725 NW US HWY 129  
City-St-Zip: JASPER, FL 32052

Title: S  
Name: TUCKER, IDA C  
Address: 5796 87TH TERRACE SW  
City-St-Zip: JASPER, FL 32052

Title: VP2  
Name: MCCOY, RICHARD  
Address: 2140 NW 86TH BLVD  
City-St-Zip: JASPER, FL 32052

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: MAUREEN DANIELS

T

01/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date