

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000546

FILED
Apr 14, 2009
Secretary of State

Entity Name: SUNCOAST CUTTING HORSE ASSOC., INC.

Current Principal Place of Business:

1401 U.S. HWY 17 N
SEVILLE, FL 32190

New Principal Place of Business:

Current Mailing Address:

1401 U.S. HWY 17 N
SEVILLE, FL 32190

New Mailing Address:

FEI Number: 59-3487918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWAB, ANN MARIE
1381 U.S. HWY 17 N
SEVILLE, FL 32190 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 () Delete
Name: SCHWAB, ANN MARIE
Address: 1381 U.S. HWY 17 N
City-St-Zip: SEVILLE, FL 32190

Title: V () Delete
Name: LOVE, CHUCK
Address: P.O. BOX 849
City-St-Zip: JUPITER, FL 33468

Title: D () Delete
Name: SOKOL, KATHY
Address: 1401 U.S. HWY 17 N
City-St-Zip: SEVILLE, FL 32190

Title: D () Delete
Name: SOKOL, TED
Address: 3654 PEPPER LN.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D () Delete
Name: SCOTT, PAT
Address: 18108 APSHAWA RD W
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SOKOL, TED
Address: 1401 U.S. HWY 17 N,
City-St-Zip: SEVILLE,, FL 32190

Title: D (X) Change () Addition
Name: SCOTT, PAM
Address: 18108 APSHAWA RD W
City-St-Zip: CLERMONT, FL 34711

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.

SIGNATURE: KATHY SOKOL

OFFI

04/14/2009

Electronic Signature of Signing Officer or Director

Date