

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002368

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** PASO FINO HORSE FOUNDATION, INC.

**Current Principal Place of Business:**

15316 NW 140 STREET  
ALACHUA, FL 32615 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1860  
ALACHUA, FL 32616 US

**New Mailing Address:**

**FEI Number:** 59-3550069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, MARCIA  
15316 NW 140 STREET  
ALACHUA, FL 32615 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: CED  
Name: DAVIS, MARCIA  
Address: 15316 NW 140 STREET  
City-St-Zip: ALACHUA, FL 32615 US

Title: ST  
Name: SPENCE, SHEILA  
Address: 4030 SE 219 AVENUE  
City-St-Zip: MORRISTOWN, FL 32668 US

Title: D  
Name: MEYER, RICK  
Address: 635 EAST HIGHWAY 40  
City-St-Zip: TROY, IL 62294 US

Title: D  
Name: MILLER, RICHARD  
Address: 15960 CINDY COURT  
City-St-Zip: FORT MEYERS, FL 33908 US

Title: D  
Name: GOSCHA, GARY  
Address: 11500 W 175 STREET  
City-St-Zip: OLATHE, KS 66062

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: SHEILA SPENCE

ST

03/18/2010

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

\_\_\_\_\_ Date