

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19417

FILED
Apr 15, 2004
Secretary of State

Entity Name: PASO FINO HORSE ASSOCIATION, INC.

Current Principal Place of Business:

101 N COLLINS ST
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

101 N COLLINS ST
PLANT CITY, FL 33563 US

New Mailing Address:

FEI Number: 38-2149906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCELLO, CARLO J JR
3525 POWERLINE ROAD
LITHIA, FL 33547 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: DIXON, SHARON Q
Address: 150 W FLAGLER ST STE 2400
City-St-Zip: MIAMI, FL 33130

Title: VP () Delete
Name: OWENS, JAMES
Address: 2951 PANGBOURNE COVE
City-St-Zip: GERMANTOWN, TN 38138

Title: T () Delete
Name: COLEMAN, TONY
Address: 5907 BRECKENRIDGE PKWY
City-St-Zip: TAMPA, FL 33610

Title: S () Delete
Name: LONDONO, SHARON
Address: 19215 LARGO LN
City-St-Zip: COVINGTON, LA 70435

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHARON Q DIXON

P

04/15/2004

Electronic Signature of Signing Officer or Director

Date