2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P19417

1. Entity Name

PASO FINO HORSE ASSOCIATION, INC.

|--|

FILED Apr 10, 2003 8:00 am Secretary of State

04-10-2003 90066 027 ****61.25

Principal Plac							
	ce of Business	Mailing Address					
101 N COLLINS ST PLANT CITY FL 33566-3311		101 N COLLINS	•				
PLANT CITY F JS	-L. 33566-3311	PLANT CITY FL 33566-331 US	I				
		•				416 116 1 7	i ii iii ii i i i.
2. Principal F	Place of Business	3. Mailing Address	- -				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & Star	te	City & State		4. FEI Number 38	-2149906		oplied For
Zip	Country	Zip	Country			\$8.75 Ad	
33563-3	3311	33563-3311		5. Certificate of Sta	itus Desired	Fee Require	
	6. Name and Address of Currer	nt Registered Agent			ess of New Registered	Agent	
	المهرازي فالمناسبية الم	والانتخاص والأساليان المهايا	Name_	٠ - بر به ٠	. **		
	LO, CARLO J JR		Street A	ddress (P.O. Box Number is N	ot Acceptable)		 ,
	WERLINE ROAD				 _		
LITHIA F	L 33547	•					
_			City	·-	FL	Zip Cod	le
8. The above	e named entity submits this statement	for the purpose of changing its	registered office o	r registered agent, or both, in t	he State of Florida. I am	familiar with,	and accept
	itions of registered agent.	, , , , , , , , , , , , , , , , , , , ,	•	, ,		·	·
	e Table 1						
SIGNATURE	<u></u>				···		
, c	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered Agent signat	ure required when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25	1	mpaign Financing Contribution.	S5.00 May Be Added to Fees	Make Chec Florida Depar		
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND D	RECTORS IN	J 10
TITLE	I P	⊠ Delete					
	1	ALI Delete	TITLE	President		Change	₹ Addition
NAME	JOHNSON, LARRY C	ALI Delete	NAME	President Sharon Quinn D	ixon	∐ Change	▼ Addition
NAME STREET ADDRESS	PO BOX 41	X Delete	NAME STREET ADDRESS			Change	₹ Addition
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	Sharon Quinn D 150 W Flagler Miami, FL 331	St, Ste 2400		
NAME STREET ADDRESS CITY-ST-ZIP	PO BOX 41 FRUITVALE TN 38336	K Delete	NAME STREET ADDRESS CITY-ST-ZIP	Sharon Quinn D 150 W Flagler <u>Miami, FL 331</u> Vice President	St, Ste 2400	☐ Change	
NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME	PO BOX 41 FRUITVALE TN 38336 T MILLER, DICK		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Sharon Quinn D 150 W Flagler Miami, FL 331 Vice President James Owens	St, Ste 2400 30		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PO BOX 41 FRUITVALE TN 38336 T MILLER, DICK 4280 NE 14TH STREET		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Sharon Quinn D 150 W Flagler Miami, FL 331 Vice President James Owens 2951 Pangbourn	St, Ste 2400 30 e Cove		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO BOX 41 FRUITVALE TN 38336 T MILLER, DICK 4280 NE 14TH STREET DES MOINES IA 50313	₹] Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sharon Quinn D 150 W Flagler Miami, FL 331 Vice President James Owens 2951 Pangbourn Germantown, TN	St, Ste 2400 30 e Cove	☐ Change	▼ Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 of the 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 of the corporation of

SIGNATURE

Marce No. RIT RExecutive Director

4/8/03

813-719-7777

CR2E037 (10/02)