

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90334 017 ***150.00

DOCUMENT # P95000074124

1. Entity Name
GOLDEN STEEPLECHASERS, INC.



Principal Place of Business
**101 E KENNEDY BLVD
#3300
TAMPA, FL 33602 US**

Mailing Address
**101 E KENNEDY BLVD
#3300
TAMPA, FL 33602 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01272006

Chg-P

CR2E034 (11/05)

4. FEI Number

59-3334302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GORDON, BRAD A.
101 EAST KENNEDY BLVD.
STE 3300
TAMPA, FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME MICHAELS, J. PATRICK JR.
STREET ADDRESS 101 E KENNEDY BLVD #3300
CITY-ST-ZIP TAMPA, FL 33602

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VS ☐ Delete
NAME GORDON, BRAD A
STREET ADDRESS 101 E KENNEDY BLVD #3300
CITY-ST-ZIP TAMPA, FL 33602

TITLE ☒ Change ☐ Addition
NAME vice president / Treasurer
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME RAINEY, DORIS D
STREET ADDRESS 101 E KENNEDY BLVD #3300
CITY-ST-ZIP TAMPA, FL 33602

TITLE ☒ Change ☐ Addition
NAME vice president / Secretary
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~VT~~ ☒ Delete
NAME ~~RODGERS, JOAN~~
STREET ADDRESS ~~101 E KENNEDY BLVD #3300~~
CITY-ST-ZIP ~~TAMPA, FL 33602~~

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Vice President
NAME Kimbery L. Wilson
STREET ADDRESS 101 E. Kennedy Blvd., #3300
CITY-ST-ZIP Tampa, FL 33602

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Doris D. Rainey

Doris D. Rainey

4-2-06

813-226-8844

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #