2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000079679

Entity Name: FLORIDA EQUINE PUBLICATIONS, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 801 SW 60TH AVE OCALA, FL 344741827 **Current Mailing Address: New Mailing Address:** 801 SW 60TH AVE OCALA, FL 344749516 FEI Number: 59-3406060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HANCOCK, RICHARD E 801 SW 60TH AVE OCALA, FL 344749516 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition Name: PARKS, DIANE Name: 12610 NORTH U.S. HIGHWAY 27 Address: Address: City-St-Zip: OCALA, FL 34482 City-St-Zip: PD Title: Title: () Delete () Change () Addition CAMPBELL, GILBERT G Name: Name: PO BOX 381 Address: Address: City-St-Zip: TYNGSBORO, MA 01879 City-St-Zip: () Delete Title: Title: SD () Change () Addition ROBERTS, MARK Name: Name: 14216 NORTH US HIGHWAY 27 Address: Address: City-St-Zip: OCALA, FL 34482 City-St-Zip: Title: VD () Delete Title: VD (X) Change () Addition DERENZO, DEAN J MARTIN, EDDIE Name: Name: Address: 6500 NW HIGHWAY 225A Address: 3900 N.W. 165TH STREET City-St-Zip: OCALA, FL 34482 City-St-Zip: REDDICK, FL 32686 Title: VD () Delete Title: (X) Change () Addition MARTIN, EDDIE O'FARRELL, J. MICHAEL JR. Name: Name: 3900 N.W. 165TH STREET Address: P.O. BOX 818 Address: City-St-Zip: REDDICK, FL 32686 City-St-Zip: OCALA,, FL 34478 Title: () Delete Title: () Change () Addition HANCOCK, RICHARD E Name: Name: 801 SW 60TH AVENUE Address: Address: City-St-Zip: City-St-Zip: OCALA, FL 34474

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD E. HANCOCK D 03/24/2009