

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000060873

FILED  
May 01, 2003  
Secretary of State

Entity Name: CLOVER RANCH ARABIANS, INC.

## Current Principal Place of Business:

3217 DALE MABRY HWY.  
TAMPA, FL 32629

## New Principal Place of Business:

14606 NW 154TH TERRACE  
ALACHUA, FL 32615

## Current Mailing Address:

P.O. BOX 2035  
ALACHUA, FL 32616

## New Mailing Address:

FEI Number: 59-3594623

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRUISE, DAVID M  
P.O. BOX 2035  
ALACHUA, FL 32616 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CRUISE, BEVERLY L  
Address: 14606 N.W. 154TH TERR.  
City-St-Zip: ALACHUA, FL 32615

Title: D ( ) Delete  
Name: CRUISE, DAVID M  
Address: 14606 N.W. 154TH TERR.  
City-St-Zip: ALACHUA, FL 32615

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: BEVERLY L. CRUISE

PRES

05/01/2003

Electronic Signature of Signing Officer or Director

Date