

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V12126

FILED
Apr 24, 2002 8:00 AM
Secretary of State

Entity Name: HORSES OF COURSE, INC.

Current Principal Place of Business:

15939 NW 162 TERR
WILLISTON, FL 32696 US

New Principal Place of Business:

1105 N CRESCENT DR
CRYSTAL RIVER, FL 34429 US

Current Mailing Address:

P.O. BOX 380
WILLISTON, FL 32696 US

New Mailing Address:

1105 N CRESCENT DR
CRYSTAL RIVER, FL 34429 US

FEI Number: 59-3122784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, PAULA
15939 NW 162 TERR
WILLISTON, FL 32696 US

Name and Address of New Registered Agent:

PARKER, PAULA
1105 N CRESCENT DR
CRYSTAL RIVER, FL 34429 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:

04/24/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: RODRICK, MICHAEL G
Address: 1095 N STONEY POINT
City-St-Zip: CRYSTAL RIVER, FL

Title: D (X) Delete
Name: RODRICK, DEANNA
Address: 1095 N STONEY POINT
City-St-Zip: CRYSTAL RIVER, FL

Title: D () Delete
Name: PARKER, PAULA
Address: 15939 NW 162 TERR
City-St-Zip: WILLISTON, FL 32696

Title: D () Delete
Name: PARKER, ELMER L JR
Address: 15939 NW 162 TERR
City-St-Zip: WILLISTON, FL 32696

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: PARKER, PAULA
Address: 1105 N CRESCENT DR
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D (X) Change () Addition
Name: PARKER, ELMER L JR
Address: 1105 N CRESCENT DR
City-St-Zip: CRYSTAL RIVER, FL 34429

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: PAULA PARKER

DIR

04/24/2002

Electronic Signature of Signing Officer or Director

Date