

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90209 017 ****70.00

DOCUMENT # F97000001468

1. Entity Name

THOROUGHbred RETIREMENT FOUNDATION, INC.

Principal Place of Business

**450 SHREWSBURY PLAZA
 SUITE 351
 SHREWSBURY NJ 07702**

Mailing Address

**450 SHREWSBURY PLAZA
 SUITE 351
 SHREWSBURY NJ 07702**

978784



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3132741

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**JONES, ELLIE
 3863 WOODS WALK BLVD
 LAKE WORTH FL 33467**

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

**After September 13, 2002,
 min. will be \$236.25.**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC KOEHLER, MONIQUE S 174 DEEPDALE DR MIDDLETOWN NJ 07748	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STUART, JOHN 6289 HARRODSBURG RD NICHOLASVILLE KY 40356	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HODES, CAROL 66 STAGHORN DR MATAWAN NJ 07747	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELDEN, JAMES 520 SWEET WOOD WAY WELLINGTON FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ROY, RAYMOND P.O. BOX 188 PLEASANT VALLEY CT 06063	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HARRISON, MICHAEL 3155 ROUTE 10E DENVER NJ 07834	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12 Fuller Road

CR2E037 (4/02)

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 or trustee empowered to 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 with an address, with all other like empowered.

SIGNATURE:

Monique S. Koehler 8-30-02 732-957-0182

Attachment

TRF OFFICERS AND DIRECTORS

9-18-84
F9700000146 S

TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D BOWEN, EDWARD L. GRAYSON-JOCKEY CLUB RESEARCH FDN. 821 CORPORATE DRIVE LEXINGTON, KY 40503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROTHERS, JACK 4 CLINTON WALK BREEZY POINT, NY 11697
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV FINLEY, SUSAN 27 MONMOUTH STREET, 2 ND FLOOR RED BANK, NJ 07701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FURST, M.D., ALAN D. 126 MANNERS ROAD RINGOES, NJ 08551
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAV GRAYSON, GEORGE 2300 M STREET, SUITE 700 WASHINGTON, DC 20037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANCOCK, RICHARD FTBOA, 801 S.W. 60 TH AVENUE OCALA, FL 34474-9516
TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D HETTINGER, JOHN AKINDALE FARM QUAKER HILL ROAD PAWLING, NY 12564
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRONE, JULIEANN 7305 MARINE PLACE CARLSBAD, CA 92009
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONDON, DEBORAH 845 UNITED NATIONS PLAZA, APT. 40E NEW YORK, NY 10017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANE, DVM, THOMAS J. 17200 SE 58 TH AVE. SUMMERFIELD, FL 34491
TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D LONG, JOHN CHURCHILL DOWNS INCORPORATED 700 CENTRAL AVE. LOUISVILLE, KY 40208-1200
TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D McDONALD, REILEY EATON SALES 4454 MT. HOREB PIKE LEXINGTON, KY 40511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, LINDA COUNTY ROAD 329, P.O. BOX 900 FAIRFIELD, FL 32634
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENNA, ELINOR 82 ROXBURY STREET GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRIGGEN, LESLIE 41 FLATBUSH CAMP ROAD SAUGERTIES, NY 12477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANTULLI, PEGGY 37 BLOSSOM COVE ROAD MIDDLETOWN, NJ 07701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMIDT, FAYE 1125 LANGE LAKE ROAD BRENHAM, TX 77833

TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D SEIGENFELD, EDWARD P. TRIPLE CROWN PRODUCTIONS 700 CENTRAL AVE. LOUISVILLE, KY 40208-1200
TITLE NAME COMPANY STREET ADDRESS CITY-ST-ZIP	D TUTTLE, JANET ROCK HALL STUD 6520 SWAN CREEK ROAD ROCK HALL, MD 21661
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZITO, NICHOLAS P. 1330 Diplomat Parkway HOLLYWOOD, FL 33019