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R.A. Charge G. Onlles JUL 0 7 2004

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: THUNDER BAY HORSE RESCUE, Inc. (Name of corporation)
DOCUMENT NUMBER: 3000 001824
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LINDA E. SPARN (Name of person) Thunder Bay Holse Resent, Inc. (Name of firm/company) 550 Bosphorus Ave
(Address)
TAMPA, FloRida 33606 (City/state and zip code)
For further information concerning this matter, please call:
Linda SPARN at (813) 251 2556 (Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

· (1)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

· ()

=	-	s 607.0502, 617.0502, 60		Florida Statutes, this	•
-	- "	n organized under the lav stered agent, or both, in i			in order
to change us regis	nerea office or regi	. 0)	
1. The name of the	e corporation:	hunder Bay	L HORSE KE	escut	
2. The principal of	ffice address:	50 Bosphoru	s Ave		<u>. </u>
	<u> </u>	TAMPA, Fla.	33606	_ 	····
3. The mailing add	dress (if different);	Same			
					<u> </u>
4. Date of incorpo	ration/qualification	: 9-11-2003	Document number:	3000001824	
The name and s Florida Departn		current registered agent	and registered office	on file with the	
		a WEASE	<u> </u>		
_	509	Chittingford Halbal, 210,	Vose		
_	Palm	Harbar, 3101	eida 340	683	
6. The name and s (if changed):	1	new registered agent (if	changed) and /or regi	istered office	SECF
_	and the second second	la SPARN			JUN 2
	550	Bosphorus A			RY C
	Tan	(P.O. Box or personal mailbox	-	· · ·	
_		Pa, Flatia	33600	<u>6</u> 2	1: 2
The street address changed will be id	s of its registered o dentical.	office and the street addr	ess of the business o	office of its registered	agent, as
Such change was the board, or the c	authorized by rescorporation has be-	olution duly adopted by en notified in writing of	its board of directors the change.	s or by an officer so a	uthorized by
Sale	2. Sfarn		Lindae	5. SPARN, SUCK	EHARY TREA
` •	nature of an officer or din	ector) registered agent and ag		nted or typed name and title)	
i juriner agree io duties, and I am fo being filed merely	comply with the pi amiliar with and a y to reflect a chang vriting of this chan	rovisions of all statutes eccept the obligation of t re in the registered offic	ree to act in this cap relative to the prope ny position as regist e address, I hereby c	actly. Trand complete perfor Pered agent. Or, if thi Confirm that the corpo	rmance of my s document is oration has
Linda	& Marin	<u></u>	\mathcal{A}	une 23, 20	20 Y
	ignature of Registered Ag	ent)	<u> </u>	(Date)	
If signing on beha	alf of an entity:				
	Typed or Printed Name)				<u> </u>
1	*15-en or rinnen Halle)			(Capacity)	

* * * FILING FEE: \$35.00 * * *