

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 9:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N34253** (7)

1. Corporation Name

**RETIREMENT HOME FOR HORSES, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
P. O. BOX 2100 ALACHUA FL 32615-2100 US  
P. O. BOX 2100 ALACHUA FL 32615-2100 US

3. Date Incorporated or Qualified **09/15/1989** 3a. Date of Last Report **03/11/1994**

4. FEI Number **NOT APPLICABLE** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 **30213 NW 235A** 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 **ALACHUA FL** 28 **ALACHUA FL**

24 **32615-2100** 25 **US** 29 **32615-2100** 30 **US**

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MURPHY, MELISSA JAY  
2700 NW 43RD STREET  
SUITE C  
GAINESVILLE FL 32608

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable) **703 NE 1 ST**  
83  
84 City **GAINESVILLE** FL 85 Zip Code **32601**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DPT**  
NAME **GREGORY, PETER F.**  
STREET ADDRESS **COUNTRY ROAD 235A**  
CITY-ST-ZIP **ALACHUA FL**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **DVS**  
NAME **GREGORY, MARY**  
STREET ADDRESS **COUNTRY ROAD 235A**  
CITY-ST-ZIP **ALACHUA FL**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **D**  
NAME **YOH, TED S**  
STREET ADDRESS **8209 SW 95TH LANE**  
CITY-ST-ZIP **GAINESVILLE FL**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **D**  
NAME **KOLLIAS, CYNTHIA**  
STREET ADDRESS **104 NE 14 AVENUE**  
CITY-ST-ZIP **GAINESVILLE FL**

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS **OMIT**  
4.4 CITY-ST-ZIP

TITLE **D**  
NAME **JENSEN, HOLLY**  
STREET ADDRESS **11714 SW 89 STREET**  
CITY-ST-ZIP **GAINESVILLE FL**

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME **D**  
6.3 STREET ADDRESS **GENE STINE**  
6.4 CITY-ST-ZIP **280 W MARTIN LUTHER KING BLVD**  
**ALACHUA FL 32615**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 19.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Peter Gregory **PETER GREGORY**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 25, 1995 904-462-1001