


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90098 030 ****61.25

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1. Entity Name
NAPLES EQUESTRIAN CHALLENGE, INC.



Principal Place of Business
**206 RIDGE DRIVE
 NAPLES, FL 34108**

Mailing Address
**206 RIDGE DR
 NAPLES, FL 34108**



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country

01082007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0793008

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MARTINO, CAROLINE
 179 RIDGE DRIVE
 NAPLES, FL 34108**

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$91.25
 Due by May 1, 2007**

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MARTINO, CAROLINE	
STREET ADDRESS	179 RIDGE DRIVE	
CITY-ST-ZIP	NAPLES, FL 34108	
TITLE	VD	<input type="checkbox"/> Delete
NAME	VOGEL, JAMES D	
STREET ADDRESS	1941 MISSION DRIVE	
CITY-ST-ZIP	NAPLES, FL 34109	
TITLE	D	<input type="checkbox"/> Delete
NAME	BLACKWELL CONLEY, KAREN	
STREET ADDRESS	1850 TARPON BAY DRIVE S	
CITY-ST-ZIP	NAPLES, FL 34119	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BOMBARD, CINDY	
STREET ADDRESS	120 PEBBLE SHORES DR UNIT 206	
CITY-ST-ZIP	NAPLES, FL 34110	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CLAPPER, BRIGID S	
STREET ADDRESS	5455 JAEGER ROAD	
CITY-ST-ZIP	NAPLES, FL 34109	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Caroline Martino for NEC, Inc. **1/18/07 (239)596 2988**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #