

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000037244

**Entity Name:** EQUINE SUPPLY DEPOT, INC.

**Current Principal Place of Business:**

C/O BALDWIN  
5540 W. HWY. 329  
REDDICK, FL 32686

**Current Mailing Address:**

C/O BALDWIN  
5540 W. HWY. 329  
REDDICK, FL 32686 US

**FEI Number:** 55-0827792

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HICKS, DANIEL  
421 S PINE AVE  
OCALA, FL 34474 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name BALDWIN, MORRIS  
Address 5540 W HWY 329  
City-State-Zip: REDDICK FL 32686

Title SD  
Name BALDWIN, CARLA  
Address 5540 W HWY 329  
City-State-Zip: REDDICK FL 32686

*I hereby 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 all other like empowered.*

**SIGNATURE:** CARLA BALDWIN

**SECRETARY**

**04/26/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date