

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 132807

Entity Name: HIPPODROME CO.

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 220650
HOLLYWOOD, FL 330220650 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 220650
HOLLYWOOD, FL 330220650 US

New Mailing Address:

FEI Number: 59-0291922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLEN W SPITZER
1850 MONROE ST
HOLLYWOOD, FL 33022 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STVD () Delete
Name: MARILYN A WEST,
Address: 1850 MONROE ST
City-St-Zip: HOLLYWOOD, FL 33022

Title: PTD () Delete
Name: ELLEN W SPITZER,
Address: 1850 MONROE ST
City-St-Zip: HOLLYWOOD, FL 33022

Title: D () Delete
Name: JOHN ROBERT KNIGHT,
Address: 1850 MONROE ST
City-St-Zip: HOLLYWOOD, FL 33022

Title: D () Delete
Name: SPITZER, ELLEN F
Address: 1850 MONROE ST
City-St-Zip: HOLLYWOOD, FL 33022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ELLEN W. SPITZER

PRES

01/06/2005

Electronic Signature of Signing Officer or Director

_____ Date