

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**



DOCUMENT # 585340																								
1. Entity Name HIND & HORSE SUPPLY, INC.																								
2. Principal Place of Business CHAPEAU ROAD JACKSONVILLE FL 32211		3. Mailing Address 1020 CHAPEAU ROAD JACKSONVILLE FL 32211																						
4. FEI Number 59-1908052		Applied For Not Applicable																						
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																								
6. Name and Address of Current Registered Agent CHARLES SORNESON, ESQ. 1108 BLACKSTONE BUILDING BAY STREET JACKSONVILLE FL 32202		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																						
8. 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, obligations of registered agent.																								
9. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE																								
FILE NOW!!! FEE IS \$150.00 (After May 1, 2006 Fee Will Be \$550.00) Check Payable to Florida Department of State		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May C. Added to Fees																						
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																						
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judith M. Pellicer* JUDITH M. PELLICER 1/19/06 (904) 7247205