## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#761362** 

FILED May 10, 2007 Secretary of State

Entity Name: VINCEREMOS RIDING CENTER, INC.

Current Principal Place of Business:		New Principal Place of Business:	
13300 6TH COURT N LOXAHATCHEE, FL 33470			
Current Mailing Address:		New Mailing Address:	
13300 6TH COURT N LOXAHATCHEE, FL 33470			
FEI Number: 59-2274451 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:			
SMITH, CHARLOTTE 7342 PINE PARK DRIVE NORTH LOXAHATCHEE, FL 33470 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
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete BROGLIO, ISEULT 304 MARBLE CANYON DRIVE WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete CAPPOLA, JESSIA 11967 POLO CLUB ROAD WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete HADDEN, PATTI 4045 GEM LAKE DR WEST PALM BEACH, FL 33409	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete SYBEN, LEE MRS. 19746 BLACK FALCON LANE LOXAHATCHEE, FL 33407	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete MARSCHOK, EMILY MS. 11955 POLO CLUB RD WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete MAC MILLAN, NEIL MR. 13493 COLUMBINE WELLINGTON, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition
I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.			

Electronic Signature of Signing Officer or Director

SIGNATURE: CHARLOTTE SMITH

Date

05/10/2007

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