## 2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Feb 20, 2010 **DOCUMENT#764323** Secretary of State

Entity Name: HORSES AND THE HANDICAPPED OF SOUTH FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3600 W SAMPLE ROAD H&HBARN

COCONUT CREEK, FL 33073 US

**New Mailing Address: Current Mailing Address:** 

P.O BOX 273542

BOCA RATON, FL 334273542 US

FEI Number: 59-2211126 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

DAVELL, CHRIS 3600 W SAMPLE RD COCONUT CREKK, FL 33073 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.

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

SIGNATURE:

KEW, JESSICA Name: Address: 6999 NW 75TH ST

City-St-Zip: POMPANO BEACH, FL 33067

Title: CD

Name: DAVELL, CHRIS

Address: 3847 PINE HAVEN CIRCLE City-St-Zip: BOCA RATON, FL 33431

Title:

SIMMONDS, WINSTON Name: Address: 5410 S.W. 148 AVE

City-St-Zip: SOUTHWEST RANCHES, FL 33330

Title: VCD

Name: VEGSO, ANNE

3608 CARLTON PLACE Address: City-St-Zip: BOCA RATION, FL 33496

Title: ED

DEBORD, AMANDA Name: 1434 NW 49TH AVE Address:

City-St-Zip: COCONUT CREEK, FL 33063

Title:

WIENER, ALISON Name:

Address: 940 SWEETWATER LANE, #205 BOCA RATON, FL 33431 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA DEBORD ED 02/20/2010