

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H36729

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: PINE FOREST SADDLERY, FARM & GARDEN, INC.

## Current Principal Place of Business:

7801 PINE FOREST ROAD  
PENSACOLA, FL 32526

## New Principal Place of Business:

7801 PINE FOREST ROAD  
PENSACOLA, FL 32526 US

## Current Mailing Address:

7801 PINE FOREST ROAD  
PENSACOLA, FL 32526

## New Mailing Address:

7801 PINE FOREST ROAD  
PENSACOLA, FL 32526 US

FEI Number: 59-2476305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CROSSLAND, LUCY R.  
7801 PINE FOREST RD  
PENSACOLA, FL 32526 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: PD ( ) Delete  
Name: CROSSLAND, LUCY R.  
Address: 5705 ESPERANTO DR  
City-St-Zip: PENSACOLA, FL

Title: VD ( ) Delete  
Name: HAMILTON, JACQUELYN W.  
Address: 7391 PINE FOREST RD  
City-St-Zip: PENSACOLA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CROSSLAND, LUCY R.  
Address: 5705 ESPERANTO DR  
City-St-Zip: PENSACOLA, FL 32526 US

Title: VD (X) Change ( ) Addition  
Name: HAMILTON, JACQUELYN W.  
Address: 7391 PINE FOREST RD  
City-St-Zip: PENSACOLA, FL 32526 US

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

SIGNATURE: LUCY R. CROSSLAND

PD

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date