

2007

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2007 8:00 am
Secretary of State

03-13-2007 90016 015 ***150.00

DOCUMENT # K58009

1. Entity Name

HOBBY HORSE TACK SHOPPE, INC



DO NOT WRITE IN THIS SPACE

40034878

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

29495 WILDLIFE LANE

Suite, Apt. #, etc.

3. Mailing Address

29495 WILDLIFE LANE

Suite, Apt. #, etc.

City & State

BROOKSVILLE, FL

City & State

BROOKSVILLE, FL

4. FEI Number

59-2922746

Applied For

Not Applied

Zip

34602

Country

HERNANDO

Zip

34602

Country

HERNANDO

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JUDITH M FANNIN

Street Address (P.O. Box Number is Not Acceptable)

29495 WILDLIFE LN

City

BROOKSVILLE

FL

Zip Code
34602

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPPD
JUDITH M FANNIN
29495 WILDLIFE LN
BROOKSVILLE, FL 34602TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
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CITY-ST-ZIPDO NOT WRITE
IN THIS SPACE

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

SIGNATURE: *Larry J. Fannin* LARRY J. FANNIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/07

Date

352-799-8509

Daytime Phone #