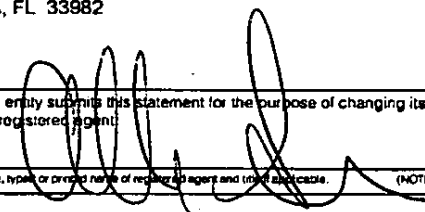
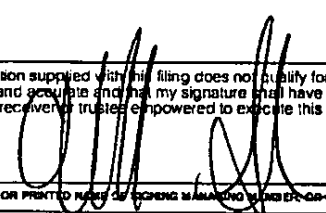


FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90135 008 ***150.00

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000040741		
1. Entity Name A & S EQUESTRIAN CENTER, LLC		
Principal Place of Business 30425 RABBIT RUN PUNTA GORDA, FL 33982 US		Mailing Address 30425 RABBIT RUN PUNTA GORDA, FL 33982 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SHELATZ, ALLYN 30425 RABBIT RUN PUNTA GORDA, FL 33982		DO NOT WRITE IN THIS SPACE
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:  (NOTE: Registered Agent signature required when reappointing) DATE: 3-05		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SANBORN, AUDREY 30425 RABBIT RUN PUNTA GORDA, FL 33982	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHELATZ, ALLYN 30425 RABBIT RUN PUNTA GORDA, FL 33982	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE:  DATE: 2-15-05		