

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109349

Entity Name: HORSE THERAPY, LLC

FILED
Aug 25, 2011
Secretary of State

Current Principal Place of Business:

1610 CLERMONT DRIVE, NO. 104
NAPLES, FL 34109

New Principal Place of Business:

1101 RIVER REACH DRIVE
#417
FORT LAUDERDALE, FL 33315

Current Mailing Address:

1610 CLERMONT DRIVE, NO. 104
NAPLES, FL 34109

New Mailing Address:

P.O. BOX 771056
NAPLES, FL 34107

FEI Number: 27-3750116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

WARD, WALLACE
1101 RIVER REACH DRIVE
#417
FORT LAUDERDALE, FL 33315 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: WALLACE WARD

08/25/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WARD, WALLACE
Address: P.O. BOX 771056
City-St-Zip: NAPLES, FL 34107

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: WALLACE WARD

MGRM

08/25/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date