

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005073

FILED  
Apr 09, 2006  
Secretary of State

Entity Name: HOPE - HORSES HELPING PEOPLE, INC.

## Current Principal Place of Business:

9722 SW 153 AVE  
ARCHER, FL 32618

## New Principal Place of Business:

## Current Mailing Address:

5333 SW 75 ST L-71  
GAINESVILLE, FL 32608

## New Mailing Address:

3038 SW 91 TERRACE  
GAINESVILLE, FL 32608

FEI Number: 59-3671382

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUEGEL, CAROL  
5333 SW 75 ST L-71  
GAINESVILLE, FL 32608 US

## Name and Address of New Registered Agent:

HUEGEL, CAROL  
3038 SW 91 TERRACE  
GAINESVILLE, FL 32608 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:

04/09/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: BROWN, CATHI  
Address: 883 SW CUMORAH HILL ST  
City-St-Zip: FT WHITE, FL 32038

Title: D ( ) Delete  
Name: TROMBINI, ANDREA  
Address: 701 SOUTHWEST 62 BOULEVARD #G44  
City-St-Zip: GAINESVILLE, FL 32607

Title: PD ( ) Delete  
Name: HUEGEL, CAROL  
Address: 11326 SW 21 LANE  
City-St-Zip: GAINESVILLE, FL 32607

Title: SD ( ) Delete  
Name: GILBERT, ANDREA  
Address: 3960 NW 23 CIRCLE  
City-St-Zip: GAINESVILLE, FL 32605

Title: VD (X) Delete  
Name: HOPE, LISA  
Address: 6215 TALLANT ROAD  
City-St-Zip: MC DONALD, TN 37353

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: TROMBINI, ANDREA  
Address: 701 SOUTHWEST 62 BOULEVARD #G44  
City-St-Zip: GAINESVILLE, FL 32607

Title: PD (X) Change ( ) Addition  
Name: HUEGEL, CAROL  
Address: 3038 SW 91 TERRACE  
City-St-Zip: GAINESVILLE, FL 32607

Title: VD (X) Change ( ) Addition  
Name: RAU, BETH-ANN  
Address: 6060 NW 22 STREET  
City-St-Zip: MICANOPY, FL 32667

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHI N BROWN

TD

04/09/2006

Electronic Signature of Signing Officer or Director

Date