

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005402

FILED
Feb 19, 2011
Secretary of State

Entity Name: HEARTLAND HORSES & HANDICAPPED, INC.

Current Principal Place of Business:

118 WEST COLLEGE DRIVE
AVON PARK, FL 33825 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3787
SEBRING, FL 338713787 US

New Mailing Address:

FEI Number: 59-3734956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE NCT GROUP CPA'S, LLP
435 SOUTH COMMERCE AVENUE
SEBRING, FL 338703702 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CASTILOW, MARIA
Address: 2131 LAKEVIEW DRIVE, #402
City-St-Zip: SEBRING, FL 33870 US

Title: VP
Name: VAN HOOREWEGHE, FRANCIS
Address: 4206 MANDARIN ROAD
City-St-Zip: SEBRING, FL 33875 US

Title: D
Name: NICHOLS, BILL
Address: 100 NICHOLS WAY
City-St-Zip: SEBRING, FL 33875 US

Title: D
Name: NICHOLS, REBECCA L
Address: 1603 INDIAN DRIVE
City-St-Zip: SEBRING, FL 33875 US

Title: TRES
Name: TAVENIERE, KATHLEEN M
Address: PO BOX 4413
City-St-Zip: SEBRING, FL 338714413 US

Title: SECT
Name: VAN HOOREWEGHE, MARY
Address: 4206 MANDARIN ROAD
City-St-Zip: SEBRING, FL 33875 US

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN M. TAVENIERE

TRES

02/19/2011

Electronic Signature of Signing Officer or Director

Date