FILED

03 JUN 17 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000007050

1. Entity Name
GREENER PASTURES THERAPEUTIC RIDING CENTER, INC.

Principal Place of Business	Mailing Address
4550 EMERSON DR. SW PALM BAY, FL 32908	4550 EMERSON DR. SW PALM BAY, FL 32908

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 75-2977762 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MEEKS, SONYA
4560 EMERSON DR. SW
PALM BAY, FL 32908

7. Name and Address of New Registered Agent

Name: Sonya Cohan
Street Address (P.O. Box Number is Not Acceptable): 4550 Emerson Dr SW
City: Palm Bay FL Zip Code: 32908

Same person - name change

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] 6-12-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW. FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD COHAN, LAWRENCE P. O. BOX 201 YANKEETOWN, FL 34908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O Lori Rangier 2134 Leewood Blvd Melbourne FL 32935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PERCH, JERRY 4541 BECK LAKE TRAIL #2 MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COHEN, SONYA 4560 EMERSON DRIVE SW PALM BAY, FL 32908	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MOORE, VONCIL 2497 VICTOR RD COCOA, FL 32926	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEAUCHAMP, KAREN 3650 MIRIAM DR. TITUSVILLE, FL 32796	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, DAVE 917 REVON LN. NE PALM BAY, FL 32907	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

600020837326
06/16/03--01082--002 **70.00

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 6/16/03 321-724-5008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2nd submitted - called 6/12 at 10:42 am because the check had not cleared and it was not posted - told to resubmit with no penalties. jw 6/17