2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006241

Entity Name: MINIATURE HORSE CLUB OF SOUTH FLORIDA, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 20825 SW GREEN RIDGE LN. PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** PO BOX 2183 STUART, FL 349952183 FEI Number: 16-1622927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOPES, NANCY 4451 148TH TERRACE NORTH LOXAHATCHEE, FL 33470 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LOPES, TONY Name: Name: 4451 148TH TERRACE NORTH Address: Address: City-St-Zip: LOCAHATCHEE, FL 33470 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LOPES, NANCY Name: Address: 4451 148TH TERRACE NORTH Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: Title: () Delete Title: () Change () Addition KEEBLER, TERRY Name: Name: 2083 WASHINGTON ST Address: Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: () Delete Title: () Change () Addition MOONEY, DEBBIE Name: Name: 20825 SW GREEN RIDGE LN. Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: () Delete Title: (X) Change () Addition SCHULTZ, DAVID SCHULTZ, DAVID Name: Name: 4907 MOORE STREET 1596 EAGLE VIEW ROAD Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: OSTEEN, FL 32764 Title: () Delete Title: (X) Change () Addition HARPER, ROBBIE HARPER, ROBBIE Name: Name: Address: 82 SOUTH WARNER Address: 82 SOUTH WARNER JENSEN BEACH, FL 34957 JENSEN BEACH, FL 34957 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NANCY LOPES S 04/30/2003

CINDY MCQUAY, DIRECTOR 7595 21ST STREET N.W. VERO BEACH, FL 32968