

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004737

FILED  
Sep 12, 2008  
Secretary of State

**Entity Name:** DOVE HILL HORSE RANCH, INC.

**Current Principal Place of Business:**

3253 SHARON RD.  
GROVELAND, FL 34763

**New Principal Place of Business:**

**Current Mailing Address:**

3253 SHARON RD.  
GROVELAND, FL 34763

**New Mailing Address:**

**FEI Number:** 80-0069947      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MORRISSETTE, REBECCA P  
3253 SHARON ROAD  
GROVELAND, FL 34736      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: P ( ) Delete  
Name: MORRISSETTE, REBECCA P  
Address: 3523 SHARON RD.  
City-St-Zip: GROVELAND, FL 34736

Title: SS ( ) Delete  
Name: MORRISSETTE, GARY E  
Address: 238-A RIDGE CREST LOOP  
City-St-Zip: MINNEOLA, FL

Title: BM ( ) Delete  
Name: HOEPFINGER, EILEEN  
Address: 1567 APOPKA BLVD  
City-St-Zip: APOPKA, FL 32703

Title: V ( ) Delete  
Name: ELLIOTT, JENNY  
Address: 13031 SE 120TH ST  
City-St-Zip: OCKLAWAHA, FL 32179

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: V (X) Change ( ) Addition  
Name: WISE, KYLE  
Address: 466 SWANSON ST  
City-St-Zip: GROVELAND, FL 34736

I hereby certify that the information supplied with this filing does not qualify 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: REBECCA P. MORRISSETTE

P

09/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date