2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008382

FILED May 08, 2007 Secretary of State

Entity Name: HEAVENLY MEADOWS HORSE RESCUE, INC. **Current Principal Place of Business: New Principal Place of Business:** 4895 GRASSY POND RD. CHIPLEY, FL 32428 **Current Mailing Address: New Mailing Address:** 4895 GRASSY POND RD CHIPLEY, FL 32428 FEI Number: 20-3315795 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent: ROBERTS, DARRELL L 7381 SAND STONE ST NAVARRE, FL 32566 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WYZARD, MELISSA A Name: Name: 4895 GRASSY POND RD. Address: Address: City-St-Zip: CHIPLEY, FL 32428 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WYZARD, CHARLES R JR. Name: WYZARD, CHARLES R JR. Address: 4895 GRASSY POND RD. Address: 4895 GRASSY POND RD City-St-Zip: CHIPLEY, FL 32428 US City-St-Zip: CHIPLEY, FL 32428 US Title: SEC () Delete Title: () Change () Addition ALBURY, ALECIA Name: Name: 3121 COX CEMETARY RD Address: Address: City-St-Zip: SOCIAL CIRCLE, GA 30025 US City-St-Zip: Title: TREA () Delete Title: TRE (X) Change () Addition BENNETT, CANDI A Name: Name: WILLIAMS, CYNTHIA Address: 9091 CORAL GABLES RD. Address: 669 MC DONALD RD City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: LEITCHFIELD, KY 42754 US

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.

Ρ SIGNATURE: MELISSA A WYZARD 05/08/2007