

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012040

FILED  
Jul 17, 2008  
Secretary of State

Entity Name: TOBY'S EQUINE RESCUE, INC.

## Current Principal Place of Business:

4915 FIRST AVENUE EAST  
BRADENTON, FL 34208 US

## New Principal Place of Business:

## Current Mailing Address:

4915 FIRST AVENUE EAST  
BRADENTON, FL 34208 US

## New Mailing Address:

FEI Number: 20-4139987      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:

CASON, NANCY  
1900 RINGLING BOULEVARD  
SARASOTA, FL 34236 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:

Title: D ( ) Delete  
Name: DEWAAL, CHARLOTTE  
Address: 4915 FIRST AVE EAST  
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete  
Name: DEWAAL, MARIANNE  
Address: 4915 FIRST AVE EAST  
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete  
Name: JOHNSON, PATRICK  
Address: 6801 ERICA LANE  
City-St-Zip: SARASOTA, FL 34241

Title: D ( ) Delete  
Name: MARSH, BEVERLY  
Address: 4915 1ST AVE E  
City-St-Zip: BRADENTON, FL 34208

Title: D ( ) Delete  
Name: LANDERS, JUDY  
Address: 3933 LOSILLIAS DR  
City-St-Zip: SARASOTA, FL 34238

Title: D ( ) Delete  
Name: PARNER, PAMELA  
Address: 9447 DELFT RD  
City-St-Zip: SARASOTA, FL 34240

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

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

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

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: CHARLOTTE DEWAAL

D

07/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date