2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N07000000582

Entity Name: IN THE BREEZE HORSE ACADEMY, INC

Current Principal Place of Business:

7516 GARDNER RD
TAMPA, FL 33625

New Principal Place of Business:

7514 GARDNER RD
TAMPA, FL 33625

Current Mailing Address:

3810 GALLAGHER RD.
PLANT CITY, FL 33565

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FOWLER, LYNDA
3810 GALLAGHER RD
PLANT CITY, FL 33565 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: FOWLER, LYNDA
Address: 3810 GALLAGHER RD.
City-St-Zip: PLANT CITY, FL 33565

Title: ST ( ) Delete
Name: LEVASSEUR, ANN MARIE C
Address: 11305 RODRIGUEZ RD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change ( ) Addition
Name: OWENS, GEORGE J
Address: 7514 GARDNER RD.
City-St-Zip: TAMPA, FL 33625

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: LYNDA FOWLER P 02/04/2009

Electronic Signature of Signing Officer or Director — Date