## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N40072

FILED Apr 23, 2003 Secretary of State

Entity Name: HORSES AND HANDICAPPED FOUNDATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	COCK RD ANCHES, FL	33330			
Current Mailing Address:		New Mailing Address:			
P.O. BOX SUNRISE	450165 , FL 33345				
FEI Number	: 65-0222795	FEI Number Applied For()	FEI Number Not App	icable ( ) Certificate of	Status Desired ( )
Name and	d Address of C	urrent Registered Agent:	Name and	Address of New Registe	red Agent:
	RHONDA 136TH AVE	O EL 22220 - LIO			
SOUTHW The above	136TH AVE EST RANCHE named entity se of Florida.	S, FL 33330 US submits this statement for the p	ourpose of changing	ts registered office or regis	tered agent, or both,
SOUTHW The above in the Stat	136TH AVE EST RANCHE e named entity se of Florida.  RE:			ts registered office or regis Date	
SOUTHW The above in the Stat SIGNATU	136TH AVE EST RANCHE e named entity se of Florida.  RE:	submits this statement for the particles in the particles and the particles are statement for the particles and the particles are	ent		e
SOUTHW The above in the Stat SIGNATU  OFFICER Title: Name: Address:	136TH AVE EST RANCHE e named entity se of Florida.  RE: Electron S AND DIREC D () STEVENS, MAF 5353 HANCOCI	submits this statement for the partic Signature of Registered Age TORS:  Delete	ent	Date	RS AND DIRECTORS
SOUTHW The above in the Stat SIGNATU	136TH AVE EST RANCHE e named entity se of Florida.  RE: Electron S AND DIREC D () STEVENS, MAR 5353 HANCOCI SOUTHWEST R D () MOONY, TONY 5353 HANCOCI	submits this statement for the particle Signature of Registered Age TORS:  Delete RK  K RD RANCHES, FL 33330  Delete	ent  ADDITION  Title:  Name:  Address:	Date S/CHANGES TO OFFICE	RS AND DIRECTORS  Idition

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: RHONDA GILBERT D 04/23/2003