2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001800

FILED Jan 03, 2005 Secretary of State

Entity Name: TWO BRIDGES EQUESTRIAN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

805 - 37TH PLACE VERO BEACH, FL 32960

Current Mailing Address: New Mailing Address:

805 - 37TH PLACE VERO BEACH, FL 32960

FEI Number: 65-0673523 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KANTZLER, GARRICK TWO BRIDGES EQUESTRIAN HOMEOWNERS ASSOC. 805 - 37TH PLACE VERO BEACH, FL 32960 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:

Flateria Circular of Decideral Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PDS () Delete
 Title:
 PDS (X) Change () Addition

 Name:
 KANTZLER, GARRICK
 Name:
 MOLOY, JAMES

 Address:
 805 37TH PLACE
 Address:
 6705 WEST 82ND AVE

 City-St-Zip:
 VERO BEACH, FL 32960
 City-St-Zip:
 VERO BEACH, FL 32967

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 KANTZLER, DOREEN
 Name:
 MITCHELL, LINDA

 Address:
 1086 WINDING RIVER ROAD
 Address:
 8340 65TH STREET

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32967

 Name:
 SMITH, MARY
 Name:
 KANTZLER, DOREEN

 Address:
 6600 W 82ND AVE
 Address:
 101 WEST SANDPOINTE DRIVE

 City-St-Zip:
 VERO BEACH, FL 32963
 City-St-Zip:
 VERO BEACH, FL 32963

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: DOREEN KANTZLER TD 01/03/2005