

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2002 8:00 am  
Secretary of State

04-30-2002 90163 007 \*\*\*\*71.25

DOCUMENT # N96000004851

1. Entity Name

ROCK'N'WIN EQUITHERAPY, INC.

Principal Place of Business

1983 HOOT OWL HILL  
TALLAHASSEE FL 32317

Mailing Address

1983 HOOT OWL HILL  
TALLAHASSEE FL 32317

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

50-3418849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMS, SANDI  
1983 HOOT OWL HILL  
TALLAHASSEE FL 32317

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
BEASLEY, DEBORAH  
600 STOC LAND ROAD  
HAVANA FL 32333 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
REVELL, LISA  
1983 HOOT OWL HILL  
TALLAHASSEE FL 32317 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DM  
HALL, KEVIN  
RT 4 BOX 81  
BLAKELY GA 31723 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
TURNER, ROBERT  
110 LIBERTY STREET  
BLAKELY GA 31723 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
FOXWORTH, DOTTIE  
2040 FRANK SMITH ROAD  
QUINCY FL 32352 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DD  
WILLIAMS, SANDI  
1983 HOOT OWL HILL  
TALLAHASSEE FL 32317 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

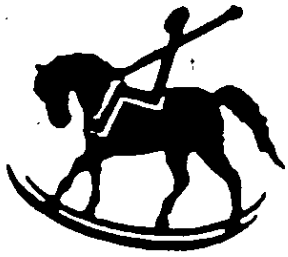
4/18/02

Date

850-627-2844

Daytime Phone #

CR2E037 (9/01)



Attachment  
Document #  
N96000004851  
Rock 'N' Win Equitherapy 778244  
"Where Everyone Finishes a Winner"

4/18/02

Please find enclosed a money order in the amount of \$71.25. One portion of these monies - \$61.25 - is to cover our 2002 Uniform Business Report filing fee. I would like to request a copy of our Articles of Incorporation as well and am including the additional \$10.00 to cover same.

Thank you,  
Sandra Williams  
EXECUTIVE DIRECTOR  
REGISTERED AGENT