


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N96000006568 1. Entity Name ROCKINGHORSE FUND, INC.	
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Principal Place of Business 6300 ROCKINGHORSE ROAD JUPITER, FL 33458	Mailing Address 6300 ROCKINGHORSE RD JUPITER, FL 33458
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DO NOT WRITE IN THIS SPACE



03312008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0708442	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HOLMES, BEVERLY 1469 SW ALBATROSS WAY PALM CITY, FL 34990
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP COX, ARTHUR R 6300 ROCKINGHORSE RD JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV KORZH, ALEXANDER 235 EAST RIVER DR., NO 507 EAST HARTFORD, CT 06108
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DS HOLMES, BEVERLY 1469 SW ALBATROSS WAY PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D HECHT, RALPH 130 BOW SPIRIT NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

<p>U00000893172 04/23/08-80096-003 61.25</p> DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Beverly Holmes</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>April 7, 2008</i> <small>Date</small>	<i>772-219-8556</i> <small>Daytime Phone #</small>
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