

**2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 07, 2007  
Secretary of State**

DOCUMENT# N97000002239

Entity Name: HORSES FOR THERAPEUTIC RIDING INC.

**Current Principal Place of Business:**

976 HYACINTH DRIVE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

976 HYACINTH DRIVE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 65-0747158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

ZEITCHICK, STANLEY L  
976 HYACINTH DRIVE  
DELRAY BEACH, FL 33483      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: STANLEY ZEITCHICK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ZEITCHICK, STANLEY S  
Address: 976 HYACINTH DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

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

Title: VT      (X) Delete  
Name: CHALFIN, HOWARD  
Address: 3720 S. OCEAN BLVD.  
City-St-Zip: HIGHLAND BEACH, FL 33487

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

Title: VT      (X) Delete  
Name: RICHARD, VICTOR  
Address: 4642 ADDISON ST  
City-St-Zip: BOCA RATON, FL 33428

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

Title: VT      ( ) Delete  
Name: WOLOWICZ, RAYMOND  
Address: 1620 S OCEAN BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33062

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

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: STANLEY L. ZEITCHICK

PRES

10/07/2007

Electronic Signature of Signing Officer or Director

Date