## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000036199

Entity Name: DARK HORSE FOLIESTRIAN CENTRE INC.

FILED Apr 06, 2004 Secretary of State

	and Brackette	THE EQUEUTION OF THE	_, 1140.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1610 MCCULLOCH ROAD OVIEDO, FL 32765			15100 LAKE PICKETT I ORLANDO, FL 32820	15100 LAKE PICKETT RD ORLANDO, FL 32820	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ERSCAPE WAY O, FL 32828	(			
FEI Numbe	er: 03-0420729	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
660 WAT	I, REBEKAH ERSCAPE WAY O, FL 32828	(			
	re named entity s te of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	JRE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	ampaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P () FIELDEN, REBI	Delete EKAH	Title: ( Name:	) Change ( ) Addition	

Address: 660 WATERSCAPE WAY Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REBEKAH FIELDEN Ρ 04/06/2004