## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000070181

Entity Name: OAK PARK STABLES AND CARRIAGE COMPANY

FILED Jan 04, 2005 Secretary of State

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

17950 SW 55 ST 17630 SW 56 ST

SOUTHWEST RANCHES, FL 33331 SOUTHWEST RANCHES, FL 33331

Current Mailing Address: New Mailing Address:

17950 SW 55 ST 17630 SW 56 ST

SOUTHWEST RANCHES, FL 33331 SOUTHWEST RANCHES, FL 33331

FEI Number: 90-0040204 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:

RIDENOUR, KATHARINE

17950 SW 55 ST 17630 SW 56 ST

SOUTHWEST RANCHES, FL 33331 US SOUTHWEST RANCHES, FL 33331 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: KATHARINE RIDENOUR 01/04/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

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

 Name:
 RIDENOUR, KATHARINE
 Name:
 RIDENOUR, KATHARINE

 Address:
 17950 SW 55 ST
 Address:
 17630 SW 56 ST

City-St-Zip: SOUTHWEST RANCHES, FL 33331 City-St-Zip: SOUTHWEST RANCHES, FL 33331

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

 Name:
 RIDENOUR, LEE
 Name:
 RIDENOUR, LEE

 Address:
 17950 SW 55 STREET
 Address:
 17630 SW 56 STREET

City-St-Zip: SOUTHWEST RANCHES, FL 33331 City-St-Zip: SOUTHWEST RANCHES, FL 33331

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: KATHARINE RIDENOUR DP 01/04/2005