

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098318

FILED
Apr 28, 2005
Secretary of State

Entity Name: BLACKHORSE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

1391-B NO KILLIAN DR SUITE 1
LAKE PARK, FL 33403

New Principal Place of Business:

1391 N. KILLIAN DRIVE
SUITE # B-1
LAKE PARK, FL 33403

Current Mailing Address:

1391-B NO KILLIAN DR SUITE 1
LAKE PARK, FL 33403

New Mailing Address:

1391 N. KILLIAN DRIVE
SUITE # B-1
LAKE PARK, FL 33403

FEI Number: 04-3714431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, VICKI A
12966 HAMPTON LAKES CIRCLE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

ROSE, VICKI A
1391 N. KILLIAN DRIVE
SUITE # B-1
LAKE PARK, FL 334303 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:

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSE, VICKI A
Address: 12966 HAMPTON LAKES CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP () Delete
Name: POTTS, GARY E
Address: 3951 N HAVERHILL RD
City-St-Zip: WEST PALM BEACH, FL 33417

Title: S (X) Delete
Name: HALL, PENNY
Address: 4935 LAME PANTHER LANE
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSE, VICKI A
Address: 1391 N. KILLIAN DRIVE, SUITE # B-1
City-St-Zip: LAKE PARK, FL 33403

Title: VP (X) Change () Addition
Name: POTTS, GARY E
Address: 1391 N. KILLIAN DRIVE, SUITE # B-1
City-St-Zip: LAKE PARK, FL 33403

Title: () Change () Addition
Name:
Address:
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: VICKI ANN ROSE

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date