

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096681

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: YOUNG'S EQUINE SERVICES INC.

## Current Principal Place of Business:

3405 JAMISON DR.  
APOPKA, FL 32703

## New Principal Place of Business:

11341 HARDER RD.  
CLERMONT, FL 34711

## Current Mailing Address:

3405 JAMISON DR.  
APOPKA, FL 32703

## New Mailing Address:

11341 HARDER RD.  
CLERMONT, FL 34711

FEI Number: 55-0851140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YOUNG, KATHLEEN A  
3405 JAMISON DR.  
APOPKA, FL 32703

## Name and Address of New Registered Agent:

YOUNG, KATHLEEN A  
11341 HARDER RD.  
CLERMONT, FL 34711

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:

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: YOUNG, KATHLEEN A  
Address: 3405 JAMISON DR.  
City-St-Zip: APOPKA, FL 32703

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: YOUNG, KATHLEEN A  
Address: 11341 HARDER RD.  
City-St-Zip: CLERMONT, FL 34711

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: KATHLEEN A YOUNG

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date