

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000104661

Entity Name: HIGHHORSE CARRIAGE RIDES, INC.

FILED
May 22, 2006
Secretary of State

Current Principal Place of Business:

491 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

491 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 13-4265488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPOSA & YOUNG, PL
444 SEABREEZE BLVD.
SUITE 625
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

DIXON, JUDITH L
491 HARBOUR LIGHTS DRIVE
ORMOND BEACH, FL 32174 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: JUDITH L. DIXON

05/22/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIXON, JUDITH L
Address: 491 HARBOUR LIGHTS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: DIXON, JUDITH L
Address: 491 HARBOUR LIGHTS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP/T () Change (X) Addition
Name: MESICK, PATRICIA D
Address: 708 ORCHARD AVENUE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDITH L. DIXON

P/S

05/22/2006

Electronic Signature of Signing Officer or Director

Date