

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013473

FILED
Apr 26, 2006
Secretary of State

Entity Name: MEDALIST EQUESTRIAN GROUP, INC.

Current Principal Place of Business:

1335 LAKE BREEZE DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

% BARBARA P. RICHARDSON, ESQUIRE
250 AUSTRALIAN AVE SOUTH, STE 500
W PALM BCH, FL 33401

New Mailing Address:

FEI Number: 01-0827732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, BARBARA P ESQUIRE
SHUTTS & BOWEN LLP
250 AUSTRALIAN AVE SOUTH STE 500
W PALM BCH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BROPHY, THOMAS P
Address: 12832 MEADOWBREEZE DR
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: RICHARDSON, BARBARA P
Address: 1335 LAKE BREEZE DR
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: BROPHY, THOMAS P
Address: 12832 MEADOWBREEZE DR
City-St-Zip: WELLINGTON, FL 33414

Title: VP/D (X) Change () Addition
Name: RICHARDSON, BARBARA P
Address: 1335 LAKE BREEZE DR
City-St-Zip: WELLINGTON, FL 33414

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: BARBARA P. RICHARDSON

VP

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date