

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000014824

1. Entity Name  
EQUESTRIAN HILLS, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 APR 30 PM 12:37

Principal Place of Business  
8960 SW SR200 SUITE 1  
OCALA, FL 34476

Mailing Address  
8960 SW SR200 SUITE 1  
OCALA, FL 34476

2. Principal Place of Business - No P.O. Box #  
8960 SW SR200

3. Mailing Address  
8960 SW SR200

Suite, Apt. #, etc.  
Suite #4

Suite, Apt. #, etc.  
Suite #4

City & State  
Ocala, FL

City & State  
Ocala, FL

Zip  
34476

Country  
USA

Zip  
34476

Country  
USA

04182008 REIN-P CR2E098 (1/07)

4. FEI Number  
20-2358067

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

TURNER, MARK G  
255 MAGNOLIA AVENUE, SOUTHWEST  
WINTER HAVEN, FL 33880

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$300.00**

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

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PSTD  
FURLONG, WAYNE  
360 TAMiami TRAIL  
PORT CHARLOTTE, FL 33953 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

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NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PSTD  
Ward, John  
8960 SW SR200, Suite #4  
Ocala, Florida 34476 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DVP  
Furlong, Wayne  
360 Tamiami Trail  
Port Charlotte, FL 33953 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
200126960252  
04/30/08--01003--013 \*\*\$300.00 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
NOT REINSTATED 07/20/08 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 4/23/2008 (352) 427-4472

Date

Daytime Phone #