

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000069860

Entity Name: ROCK RIVER STABLE , INC

FILED
May 11, 2006
Secretary of State

Current Principal Place of Business:

3575 BROKEN WOOD DR
405
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

9158 N W 44TH CT
SUNRISE, FL 33051 US

Current Mailing Address:

3575 BROKEN WOOD DR
405
CORAL SPRINGS, FL 33065 US

New Mailing Address:

P. O. BOX 190192
FT LAUDERDALE, FL 33019 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALDRED, JULIET V
3037 S. W. 11TH STREET
FT LAUD, FL 33312 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

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: CEO () Delete
Name: HALSTEAD, MARLENE
Address: 3575 BROKEN WOOD DR # 405
City-St-Zip: CORAL SPRING, FL 333065 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: HALSTEAD, MARLENE
Address: 9158 N W 44TH CT
City-St-Zip: SUNRISE, FL 33351 US

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: MARLENE HALSTEAD

CEO

05/11/2006

Electronic Signature of Signing Officer or Director

Date