2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2008
Secretary of State

DOCUMENT# P06000072675

Entity Name: DECLAN ORPEN SHOW STABLES, INC.

Current Principal Place of Business:

12119 SUNSET POINT CIRCLE
WELLINGTON, FL 33414 US

New Principal Place of Business:

2119 WINGATE BEND BLVD.
WEST PALM BEACH, FL 33414 US

Current Mailing Address:

4411 HOLLAND LOOP RD
CAVE JUNCTION, OR 97523 US

New Mailing Address:

2119 WINGATE BEND BLVD.
WEST PALM BEACH, FL 33414 US

FEI Number: 20-4933177 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ORPEN, DECLAN E
12119 SUNSET POINT CIRCLE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

ORPEN, DECLAN E
2119 WINGATE BEND BLVD.
WEST PALM BEACH, FL 33414 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: DECLAN E. ORPEN 01/05/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: ORPEN, DECLAN E
Address: 12119 SUNSET POINT CIRCLE
City-St-Zip: WELLINGTON, FL 33414 US

Title: D (X) Delete
Name: ORPEN, DECLAN E
Address: 12119 SUNSET POINT CIRCLE
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: ORPEN, DECLAN E
Address: 2119 WINGATE BEND
City-St-Zip: WEST PALM BEACH, FL 33414 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DECLAN E. ORPEN PRES 01/05/2008
Electronic Signature of Signing Officer or Director Date