2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000110679

Entity Name: FLORIDA EQUINE MASSAGE & HEALTH CENTER, INC.

FILED Sep 12, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Clirrent Principal Place of Kilciness	NOW Principal Place of Bilgings

3009 SAMARA DRIVE 3023 SAMARA DRIVE TAMPA, FL 33618 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

3009 SAMARA DRIVE 3023 SAMARA DRIVE TAMPA, FL 33618 TAMPA, FL 33618

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOOD, PATIENCE A
3009 SAMARA DRIVE
TAMPA, FL 33618 US
WOOD, PATIENCE A
3023 SAMARA DRIVE
TAMPA, FL 33618 US
TAMPA, FL 33618 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: 09/12/2008

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 WOOD, PATIENCE A
 Name:
 WOOD, PATIENCE A

 Address:
 3009 SAMARA DRIVE
 Address:
 3023 SAMARA DRIVE

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33618

 Name:
 WOOD, PATIENCE A
 Name:
 WOOD, PATIENCE A

 Address:
 3009 SAMARA DRIVE
 Address:
 3023 SAMARA DRIVE

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33618

Title: S () Delete Title: S (X) Change () Addition

 Name:
 WOOD, PATIENCE A
 Name:
 WOOD, PATIENCE A

 Address:
 3009 SAMARA DRIVE
 Address:
 3023 SAMARA DRIVE

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33618

Title: T () Delete Title: T (X) Change () Addition

 Name:
 WOOD, PATIENCE A
 Name:
 WOOD, PATIENCE A

 Address:
 3009 SAMARA DRIVE
 Address:
 3023 SAMARA DRIVE

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 TAMPA, FL 33618

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: PATIENCE A. WOOD P 09/12/2008