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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham 🧼

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000015557 (8)

HORSE FEATHERS STABLES, INC.

	20, 0,00
Principal Place of Business	Mailing Address
11268 N.W. BOTH AVENUE	11268 N.W. GOTH AVENUE

FILED Mar 10 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address			i idaribai ilā idiai ditil darii darii	taltu aniet tille: grint findi brur talt, ifft.		
11268 N.W. BOTH AVENUE 11268 N.W. GOTH AVENUE						
REDDICK FL	32686	REDDICK FL 32686			DO NOT WRIT	E IN THIS SPACE
					3. Date Incorporated or Qualified	
					02/23/1995	ì
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3303446	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22	<u> </u>	27				Fee Required
City & State	Ð	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	710	Coun	tru	Trust Fund Contribution	Added to Fees
24	25	h	30	ıı y	This corporation owes or has p Personal Property Tax due Jur	
24	9. Name and Address of Current f		301		10. Name and Address of New R	
FII	LIS, MARY		1	11 Name	/	
	264 N.W. BOTH AVENUE			2 Street	Address (P.O. Box Number is Not Accept	me change
	DDICK FL 32686),	30000	Address (F.O. Box Nurilber is Not Accept	Pective 6 8 96
			ĵi	13		
			ļ.	4 City		les Zin Codo
			'	City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607,0502	and 607.1508, Florida Statute	s, the abo	ve-name	corporation submits this statement for the	purpose of changing its registered
agent. fa	egistered agent, or both, in the state of m fandligr with, and accept the obligate	riondal Such change was a gris of, Section 607.0505, Flo	utnorizea rida Statu	by the cor les.	poration's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE					Sident e required when reinstaling)	2-24-98
40	Stonardin, typed or profest name of injustment agent in OFFICERS AND I	widthed applicable (NOTE		gent signatur	e required when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
12.	D OF HOLKS WIND I	DELETE	13. 1.1 Till	<u> </u>	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	HUNT, ELIZABETH		1.2 NAM			
STREET ADDRESS	% 11268 N.W. 60TH AVENUE			ET ADDRESS		į
CITY-ST-ZIP	REDDICK FL 32686		1	-ST-ZIP	1) s
TITLE	D D	DELFTE	2.1 T(TL			Change Addition
NAME	ELLIS, MARY J		2.2 NAN		NAME CHANGE - HUNT, MARY JA	-
STREET ADDRESS	11264 N.W. 60TH AVENUE			ET ADDRESS	HUNT MARY TO	iol#
CITY-ST-ZIP	REDDICK FL 32686		2 4 CIT	r-ST-ZIP	HUNI, MARI DI	1175
TITLE		DELETE	3 1 TITL	E		Change Addition
NAME			3.2 NAN	IE		1
STREET ADDRESS			3 3 STA	ET ADDRESS	Į.	
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP		
TATE		DELETE	4.1 TITE	E		Change Addition
NAME			4. 2 NA	Æ	l.	
STREET ADDRESS			4.3 STR	EFT ADDRESS		
CITY-ST-ZIP			_	-\$1 - ZIP		
TITLE		DELETE	5.1 1ITL		1	Change Addition
NAME			5.2 NAM			i
STREET ADDRESS			53 STR	ET ADDRESS		
CITY-ST-ZIP				'-ST-ZIP		
TITLE		DELETE	61 TITL			☐ Change ☐ Addition
NAME			6.2 NAN			
STREET ADDRESS				ET ADDRESS		J
CITY-ST-ZIP		41.77		-ST-ZIP	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	16 do and the same to the same to
14. I nereby C	erury that the information supplied with	trus triing does not qualify for	ine exer	iption stat	ed in Section 119.07(3)(i), Florida Statutes.	i furtilier certify that the information

indicated on this annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address f/k/a Many Jane Ellis 2-12-98 352 7327035