## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 15 1997 8:00am Secretary of State

DOCUMENT #	P96000055678	(2)
WILD ROSE HORSE	FARM, INC.	

Principal Place of Business

Mailing Address

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22 City & State City & State 6. Election Campaign Financing \$	Applied For Not Applicable  7.75 Additional Fee Required  5.00 May Be dded to Fees nder s. 199 032,
2. Principal Place of Business	Not Applicable  7.75 Additional Fee Required  5.00 May Be added to Fees nder s. 199 032.
Suite, Apt. #, etc.    Suite, Apt. #, etc.	7.75 Additional Fee Required 5.00 May Be added to Fees Inder s. 199 032,
Suite, Apt. #, etc.  City & State  Country  Rup  Country  Rup  Country  Rup  Country  Rup  Country  Rup  Rup  Rup  Rup  Rup  Rup  Rup  Ru	5.00 May Be ddded to Fees nder s. 199 032,
23	dded to Fees nder s. 199 032,
Zip Country Zip Country Country Country Country B. This corporation has liability for intangible tax ure Florida Statutes Total No. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DROUIN, KELLY C 740 3 STREET NW NAPLES FL 33984  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chan office or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent 1 am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes.  SIGNATURE State of Pricers and Directors 10 peters agent and this displacable (NOTE: Registered Agent signature required when releasing) DATE  12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. NAME  DROUIN, KELLY C 12 NAME  SIREET ADDRESS 740 3 STREET NW 1.3 STREET NW 1.3 STREET ADDRESS 1.4 City-S1-Zip DELETE 2.2 PINTE 2.2 NAME  SIREET ADDRESS 2.3 STREET ADDRESS 2.4 CITy-S1-Zip	Zip Code
9. Name and Address of Current Registered Agent  DROUIN, KELLY C 740 3 STREET NW NAPLES FL 33984  84 City  FL 85  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of chan office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment of the provisions of Sections 607.0505, Florida Statules.  SIGNATURE  12. OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. DIRECT ADDRESS  CRIV-SL-78  NAME  SIRECT ADDRESS  CRIV-SL-78  DELETE  2 NAME  2 STREET ADDRESS  CRIV-SL-78  DELETE  2 NAME  2 STREET ADDRESS  CRIV-SL-78  CRIV-SL-78  DELETE  2 NAME  2 STREET ADDRESS  CRIV-SL-78	Zip Code
DROUIN, KELLY C 740 3 STREET NW NAPLES FL 33984  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL B5  85  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of chan office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent 1 and familiar with, and accept the obligations of, Section 607.0505, Florida Statules.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INTEREST ADDRESS  City ST-2P  NAME  DROUIN, KELLY C  740 3 STREET NW  NAPLES FL 33984  1.3 SIREET ADDRESS  CITY ST-2P  NAME  SIREET ADDRESS  CITY ST-2P  DELETE  2.1 TITLE  CITY  AMM  SIREET ADDRESS  CITY ST-2P  AMM  SIREET ADDRESS  CITY ST-2P  2.2 NAME  2.3 STREET ADDRESS  CITY ST-2P  2.3 STREET ADDRESS  CITY ST-2P  2.4 CITY ST-2P  2.5 STREET ADDRESS  CITY ST-2P  CITY S	Zip Code
NAPLES FL 33984  82 Street Address (P.O. Box Number is Not Acceptable)  83	·
NAPLES FL 33964  84 City  FL  85  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of chan office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent it am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes.  SIGNATURE  Nignation professional of registered agent and life diapplicable  PSTD  OFFICERS AND DIRECTORS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INTERMALL ADDRESS  City St. 28  NAPLES FL 33964  14. City  FL  85  R44  City  FL  85  R55  R45  R45  R47  R47  R47  R47  R4	·
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  IRLE PSTD DELETE 1.1 TITLE COROLL CORO	ent as registered
DRUIN, KELLY C	
NAME         DROUIN, KELLY C         1.2 NAME           STREET ADDRESS         740 3 STREET NW         1.3 STREET ADDRESS           C-EY-ST-ZIP         ITHE         DELETE         21 TITLE         CH           NAME         22 NAME         22 NAME         STREET ADDRESS         CHY-ST-ZIP           CHY-ST-ZIP         2 4 CHY-ST-ZIP         2 4 CHY-ST-ZIP         CHY-ST-ZIP	
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CITY - ST - ZIP	
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NAME         2.2 NAME           STREET ADDRESS         2.3 STREET ADDRESS           C(1)*-\$1-70*         2.4 C(1)*-\$1-70P	4
STREET ADDRESS         2.3 STREET ADDRESS           C(1Y-S1-ZIP         2.4 C(1Y-S1-ZIP)	hange L Addition
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City St-78° 5.4 City-St-24°	
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STREET ACCORESS 6.3 STREET ADDRESS	hange Addition
city: \$1-20 64 City: \$1-20 64 City: \$1-20 9 64 City: \$1-2	hange 🔲 Addition

Tam an officer or director of the corporation outlier receiver or trustee 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, of on an attachment with an address.

SIGNATURE: