2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000091263

Entity Name: HOBBY HORSE TOURS, INC.

FILED Apr 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 27088 RICHBARN RD BROOKSVILLE, FL 34601 US **Current Mailing Address: New Mailing Address:** P.O. BOX 10426 BROOKSVILLE, FL 34603 US FEI Number: 59-3417904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MATTHIESSEN, ANKE 27088 RICHBARN ROAD BROOKSVILLE, FL 34601 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: Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Election Campaign Financing Trust Fund Contribution ().

Title: PS () Delete
Name: PROULX, ROBERT
Address: 9595 CORTLANDT DR

Address: 9595 CORTLANDT DR City-St-Zip: CITRUS SPRINGS, FL 34434

Title: VT () Delete
Name: MATTHIESSEN, ANKE

Address: 27088 RICHBARN ROAD
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: MATTHIESSEN, ANKE
Address: 27088 RICHBARN ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANKE MATTHIESSEN PS 04/10/2005