

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2003 8:00 am
Secretary of State

08-01-2003 90139 002 ***150.00
08-01-2003 90139 001 *****8.75

0090214 AV

DOCUMENT # P97000061241

1. Entity Name
EQUESTRIAN MARKETING GROUP, INC.



Principal Place of Business
**13873 WELLINGTON TRACE B-1
WEST PALM BEACH FL 33414
WELLINGTON**

Mailing Address
**10 LINDA S. WIRTZ
PO BOX 1331
LOXAHATCHEE FL 33470-1331**



2. Principal Place of Business
**13873 WELLINGTON TRACE
B-1**

3. Mailing Address
**LINDA S. WIRTZ
EQUESTRIAN MKTG GROUP
PO BOX 1331**

☐ CHECK HERE IF MAKING CHANGES

City & State
WELLINGTON FL

City & State
LOXAHATCHEE FL

4. FEI Number **65-0774626**

Applied For
☐ Not Applicable

Zip **33470** Country **USA**

Zip **33470-1331** Country **USA**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WIRTZ, LINDA S
13873 WELLINGTON TRACE B1
WEST PALM BEACH FL 33414
WELLINGTON**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **WELLINGTON** FL **33470**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Linda S. Wirtz

(NOTE: Registered Agent signature required when reinstating)

DATE

7.29.03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS WIRTZ, LINDA S 13873 WELLINGTON TRACE B1 WEST PALM BEACH FL 33414 WELLINGTON	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT VAN DELL, JOHN 13873 WELLINGTON TRACE B1 WEST PALM BEACH FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WELLINGTON	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	WELLINGTON FL 33470	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WELLINGTON, FL 33470	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

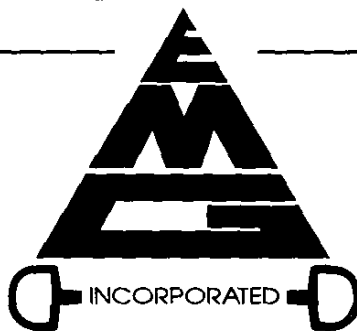
SIGNATURE:

Linda S. Wirtz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.29.03

Date **5/6/79** File # **9911**

CR2E034 (4/03)



July 29, 2003

State of Florida - Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Equestrian Marketing Group, Inc. - FEI-65-0774626-

Dear Sir:

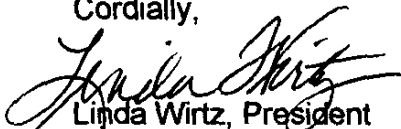
Please be advised that the original 2003 Uniform Business Report (June 6 versions) was never received. In July we received a September 10 version...

Per your instructions, I have enclosed a check in the amount of \$150.00 and the updated form and a check in the amount of \$8.75 for certificate of status fee.

If you have any questions, please contact me at 561 373-2070.

Thank you for your consideration in this matter.

Cordially,


Linda Wirtz, President

Mailing Address:

Linda Wirtz, President
Equestrian Marketing Group, Inc.
P. O. Box 1331
Loxahatchee, FL 33470-1331
561 373-2070
email: lwirtz@bellsouth.net

Office Location:

Equestrian Marketing Group, Inc.
13873 Wellington Trace - #B-1
Wellington, FL 33414
561 793-2661 Fax: 561 795-7540

Enclosures

Copy to:

Glenda E. Hood, Secretary of State, Florida Department of State,
Division of Corporations, P. O. Box 6327, Tallahassee, FL 32314

EQUESTRIAN MARKETING GROUP, INC.

Excellence in Equestrian Marketing

13873 Wellington Trace, West Palm Beach, FL 33414 • 561-793-6461 • 561-795-7540 fax