2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90406 037 ***150.00

0044239

DOCUMENT # P97000095559

1. Entity Name
ERROL EQUESTRIAN CENTER, INC.

Principal Place of Business	Mailing Address
359 LESTER RD. SUITE 1201-240 APOPKA FL 32712 US	457 APRIL LN. APOPKA FL 32712

C0054514

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
359 LESTER RD.	
Suite, Apt. #, etc. NONE	Suite, Apt. #, etc.
City & State APOPKA FL	City & State
Zip 32712 Country US	Zip Country

4. FEI Number 59-3479860 ☐ Applied For ☐ Not Applicable

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
MURPHY, MICHAEL T 931 N. STATE ROAD 434 SUITE 1201-240 ALTAMONTE SPRINGS FL 32714	Name MURPHY, LAURA R. Street Address (P.O. Box Number is Not Acceptable) 457 APRIL LANE City APOPKA FL Zip Code 32712

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.

SIGNATURE Laura R Murphy LAURA R MURPHY 4/17/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD MURPHY, LAURA R. 931 N. STATE ROAD 434, SUITE 1201-240 ALTAMONTE SPRINGS FL 32714	☐ Delete	PTD MURPHY, LAURA R. 457 APRIL LANE APOPKA FL 32712	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPSD MURPHY, MICHAEL T 931 N. STATE ROAD 434, SUITE 1201-240 ALTAMONTE SPRINGS FL 32714	☐ Delete	VPSD MURPHY, MICHAEL T. 457 APRIL LANE APOPKA FL 32712	☑ Change	☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Laura R Murphy, LAURA R. MURPHY 4/17/01 (407)886-1955
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #