## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000087212

Entity Name: QUALITY EQUESTRIAN CONNECTIONS, INC.

FILED Apr 16, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

21569 WOODSTREAM TERR. BOCA RATON, FL 33428

Current Mailing Address: New Mailing Address:

7961 SHORE DRIVE 21569 WOODSTREAM TERR. NORFOLK, VA 23518 BOCA RATON, FL 33428

FEI Number: 65-0869283 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:

REMONDINI, SUSAN C 21569 WOODSTREAM TERRACE BOCA RATON, FL 33428 US REMONDINI, SUSAN C 21569 WOODSTREAM TERRACE BOCA RATON, FL 33428 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: SUSAN REMONDINI 04/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 REMONDINI, SUSAN
 Name:
 REMONDINI, SUSAN

 Address:
 7961 SHORE DRIVE
 Address:
 21569 WOODSTREAM TERRACE

 City-St-Zip:
 NORFOLK, VA 23518
 City-St-Zip:
 BOCA RATON, FL 33428

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 REMONDINI, STEPHEN
 Name:

 Address:
 21569 WOODSTREAM TERRACE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SUSAN REMONDINI PRES 04/16/2009