

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P99000012713

Entity Name: LUCKY BREAK STABLES, INC.

**FILED**  
**May 16, 2008**  
**Secretary of State****Current Principal Place of Business:**240 WEST END DRIVE  
#413  
PUNTA GORDA, FL 33950 US**New Principal Place of Business:****Current Mailing Address:**C/O JACK O. HACKETT II  
99 NESBIT ST  
PUNTA GORDA, FL 33950 US**New Mailing Address:**C/O CONNIE M. SCHIDER  
240 WEST END DRIVE, #413  
PUNTA GORDA, FL 33950 US

FEI Number: 65-0893215

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**HACKETT, JACK O II  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US**Name and Address of New Registered Agent:**SCHIDER, CONNIE M  
240 WEST END DRIVE  
UNIT 413  
PUNTA GORDA, FL 33950 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: CONNIE M. SCHIDER

05/16/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: DPS ( ) Delete  
Name: SCHIDER, CONNIE M  
Address: 240 WEST END DRIVE, #413  
City-St-Zip: PUNTA GORDA, FL 33950 USTitle: VT ( ) Delete  
Name: HEISEL, DONALD F  
Address: 240 WEST END DRIVE, #413  
City-St-Zip: PUNTA GORDA, FL 33950 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CONNIE M. SCHIDER

DPS

05/16/2008

Electronic Signature of Signing Officer or Director

Date