

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V43080

Entity Name: BETTER HOOVES, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

5888 SE 145TH STREET
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

Current Mailing Address:

5888 SE 145TH STREET
SUMMERFIELD, FL 34491 US

New Mailing Address:

FEI Number: 65-0346968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNESS, KENNETH
5888 SE 145TH STREET
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MANNESS, KENNETH
Address: 5888 SE 145TH STREET
City-St-Zip: SUMMERFIELD, FL

Title: STV () Delete
Name: MANNESS, DAWN
Address: 5888 SE 145TH STREET
City-St-Zip: SUMMERFIELD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MANNESS, KENNETH C
Address: 5888 SE 145TH STREET
City-St-Zip: SUMMERFIELD, FL

Title: STV (X) Change () Addition
Name: MANNESS, DAWN D
Address: 5888 SE 145TH STREET
City-St-Zip: SUMMERFIELD, FL

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: DAWN D. MANNESS

STV

04/30/2007

Electronic Signature of Signing Officer or Director

Date