

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000009424

**FILED
Feb 21, 2018
Secretary of State
CC2370763972**

Entity Name: INSPIRE EQUINE THERAPY PROGRAM, INC.

Current Principal Place of Business:

1743 DONCASTER RD.
CLEARWATER, FL 33764

Current Mailing Address:

269 ARBOR DRIVE WEST
PALM HARBOR, FL 34683

FEI Number: 81-3960240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YARBROUGH, MELISSA K
269 ARBOR DRIVE WEST
PALM HARBOR, FL 34683 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name YARBROUGH, MELISSA K
Address 269 ARBOR DRIVE WEST
City-State-Zip: PALM HARBOR FL 34683

Title S
Name TRAVERS, BETH
Address 8924 OSPREY LANE
City-State-Zip: SEMINOLE FL 33777

Title T
Name WALCZAK, CANDY
Address 1841 LAKE CYPRESS DRIVE
City-State-Zip: SAFETY HARBOR FL 34695

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA YARBROUGH

EXECUTIVE DIRECTOR

02/21/2018

Electronic Signature of Signing Officer/Director Detail

Date