

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615.

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

\* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject 401.222.3040

to a penalty fee of \$25.00.		<u> </u>			<u>,</u>
1. Corporate ID No. 2. Name of Corporation					
106917	Horse P	lay			
3. State of Incorporation		oode Island - Street Address		Saunderstaun	Zφ 26 >4
Khade Lskina		rt Stuart Ro	pacl	Jau naerslawn	02879
5. Foreign corporation. Enter princ	ipal office address		City	State	Zip
		· · · · · · · · · · · · · · · · · · ·	<u>                                     </u>		L
6. Brief Description of the character of	f the affairs which are acti	ially conducted in Rhode Isla	as teamstancy ses	vices for abou	sec(
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island To provide rescue, rehabilitation, adoption "sanctuary services for abused neglected and/or un wanted horses					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS					
Provided to the first of the first of the state of the state of the first of the state of the first of the first			Vice President Name		
1 7 3	Sharp		Jadie Sinclair		
Street Address			Street Address		
143 Gilbert S	tuart Kd		134 Dayton	a Ave	
City	State	Zip 3.0 3.11	City	State	Zip
Sounderstown	KL	02874	Narragansett		02882
Secretary Name			Treasurer Name		
Iroy Hughes			Deign 1-2	harr	
Street Address	n Ave		Street Address	- Stract 1	Ed
1962 Scranto		PT-1	175 GIDEN		
Orlando	State FL	32826	Saunderstown	State RI	<sup>20</sup> 02874
8. NAMES AND ADDRESSES		S: ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES E	EFORE USING ATTACH	IMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name			Director Name	_	
Garry Lon	ردو		Mandy Cro	$\omega$	
Street Address	CJ ID	1	Street Address	رم ا	
143 Gilbert	Stuart Ke	<u> </u>	420 School S	<del></del>	
20 10 ~ 1	State	02874	City 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State RT	02852
Dangerstown		020/1	Director Name	7 67	00000
Parector Name	a C		Lione Name		
Strong Address	<u> </u>		Street Address	·····	· · · · · · · · · · · · · · · · · · ·
1962 Scran	ton Ave	·	OFF CO. STORES ESS.		
Orlando	State F	32826	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name	yek ey sa <del>raya</del> gala - <b></b>		Address	ingererae viet i Miterio i <del>M</del> illio <b>X</b> i. Ti	ann yen sanialen gredalea
Deidre F	Sharp				
Address	1		Sounders to.	Zip	211
143 Gilberts	tuart Kol		Saunders tou	un 028	<i>7</i> 4
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee					

	report, including any accompanying schedule
and the second of the property of the second	statements contained herein see true and corre
File Date FILED	Devolie + Sha
Check No. JUN 3 0 2008	Signature of Officer Deidne F Sharp
By BV 1587	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Tresident Title of Officer