

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727798

FILED
Apr 01, 2009
Secretary of State

Entity Name: FLORIDA TRAIL RIDERS, INC.

Current Principal Place of Business:

PO BOX 531071
DEBARY, FL 327531071 US

New Principal Place of Business:

116 JUAN RD
DEBARY, FL 327133509 US

Current Mailing Address:

PO BOX 531071
DEBARY, FL 327531071 US

New Mailing Address:

FEI Number: 59-1538365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGE, DANIEL T
116 JUAN ROAD
DEBARY, FL 327133509 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FAUL, RANDY
Address: 1254 NW BROWNVILLE STREET
City-St-Zip: ARCADIA, FL 34266

Title: SD () Delete
Name: ST. JOHN, TIFFANY
Address: 116 VILLAGE DR
City-St-Zip: WOODBINE, GA 31569

Title: VD () Delete
Name: MORRIS, BRIAN
Address: 17956 TAYLOR RD LOT C
City-St-Zip: JUPITER, FL 33478

Title: TD () Delete
Name: PEARCE, ALLEN
Address: 3473 49TH AVE
City-St-Zip: GAINESVILLE, FL 32605

Title: M () Delete
Name: GEORGE, DANIEL T
Address: 116 JUAN ROAD
City-St-Zip: DEBARY, FL 327133509

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PEARCE, ALLEN
Address: 3473 49TH AVE
City-St-Zip: GAINESVILLE, FL 326051069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SIMPKINS, JONNY
Address: 6300 OIL WELL RD
City-St-Zip: CLERMONT, FL 347149561

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

SIGNATURE: DANIEL T. GEORGE

M

04/01/2009

Electronic Signature of Signing Officer or Director

Date