FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 13, 1999 8:00 am
Secretary of State
04-13-1999 90105 041 ***158.75

DOCUMENT # 845868

1. Corporation Name
RIDECO, INC.

Principal Place of Business	Mailing Address
C/O J.A. NIEDENTHAL. PRESIDENT 3955 NORTHWEST 103RD DR. CORAL SPGS FL 33065	C/O RF NIEDENTHAL 5310 ALLIGATOR LAKE ROAD ST. CLOUD FL 34772 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

3. Date Incorporated or Qualifed: 04/30/1980

4. FEI Number: 74-1686666 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NIEDENTHAL, RICHARD F.
5310 ALLIGATOR LAKE ROAD
ST CLOUD FL 34772

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☑ Addition
NAME	NIEDENTHAL, JOHN A.		1.2 NAME		
STREET ADDRESS	3955 NW 103RD DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPGS FL		1.4 CITY-ST-ZIP	33065	
TITLE	VTD	☐ DELETE	2.1 TITLE		☐ Change ☑ Addition
NAME	NIEDENTHAL, RICHARD F		2.2 NAME		
STREET ADDRESS	5310 ALLIGATOR LAKE ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	ST. CLOUD FL		2.4 CITY-ST-ZIP	34772	
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change ☑ Addition
NAME	NIEDENTHAL, MICHAEL G		3.2 NAME		
STREET ADDRESS	703 LAVON AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL		3.4 CITY-ST-ZIP	34741	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☑ Addition
NAME	KRUTHAUPT, SUZANN E.		4.2 NAME		
STREET ADDRESS	142 SW 24TH AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-ST-ZIP	33312	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	NIEDENTHAL, WILLIAM J.		5.2 NAME		
STREET ADDRESS	6314 HAWKWOOD LANE		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28277		5.4 CITY-ST-ZIP		
TITLE	D	☑ DELETE	6.1 TITLE	Director	☑ Change ☐ Addition
NAME	NIEDENTHAL, JODY E		6.2 NAME	Neidlinger, Nicolet	
STREET ADDRESS	622 CLEARVIEW DR Deceased -		6.3 STREET ADDRESS	6341 N.E. 19th Terrace	
CITY-ST-ZIP	BETHEL PARK PA 26 June, 1998		6.4 CITY-ST-ZIP	Fort Lauderdale, Florida 33308	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. 1566

SIGNATURE: Richard F. Niedenthal 8 April 99 407-892-3545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)