2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N08000005416

Entity Name: RIDGE SCENIC HIGHWAY.CME, INC.

Current Principal Place of Business:

325 SOUTH SCENIC HIGHWAY
C/O DEPOT MUSEUM
LAKE WALES, FL 33859 US

New Principal Place of Business:

Current Mailing Address:

325 SOUTH SCENIC HIGHWAY
C/O DEPOT MUSEUM
LAKE WALES, FL 33859 US

New Mailing Address:

FEI Number: 26-2783928 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REID HARDMAN, MIMI
300 S. LAKE SHORE BLVD.
LAKE WALES, FL 33853 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: P D ( ) Delete
Name: REID HARDMAN, MIMI
Address: 300 S. LAKE SHORE BLVD.
City-St-Zip: LAKE WALES, FL 33853 US

Title: V D (X) Delete
Name: RINER MIZELL, LINDA
Address: PO BOX 1000
City-St-Zip: DUNDEE, FL 33838 US

Title: S D ( ) Delete
Name: NANEK, JENNIFER
Address: 200 EMERALD AVE,APT 30
City-St-Zip: LAKE WALES, FL 33853 US

Title: T D ( ) Delete
Name: WELBORN, SUSAN
Address: 361 LAKE AVENUE
City-St-Zip: BABSON PARK, FL 33827 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change ( ) Addition
Name: REID HARDMAN, MIMI PRES
Address: 300 S. LAKE SHORE BLVD.
City-St-Zip: LAKE WALES, FL 33853 US

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

Title: T D (X) Change ( ) Addition
Name: ESTEVE, EDWARD V TREAS
Address: 3655 N. SCENIC HIGHWAY
City-St-Zip: LAKE WALES, FL 33898 US

Title: V D (X) Change ( ) Addition
Name: WELBORN, SUSAN VICE D
Address: 361 LAKE AVENUE
City-St-Zip: BABSON PARK, FL 33827 US

Title: S.D. ( ) Change (X) Addition
Name: CARTER, STEPHANIE SEC. D.
Address: 450 N.SCENIC HIGHWAY
City-St-Zip: LAKE WALES, FL 33853 US

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: EDWARD V.ESTEVE T.D. 04/13/2009

Electronic Signature of Signing Officer or Director — Date