## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N42268

FILED Feb 27, 2006 Secretary of State

Entity Name: SHADY HILLS RAIDERS, INCORPORATED

US

Current Principal Place of Business: New Principal Place of Business:

15480 GREENGLEN LN SPRING HILL, FL 34610

Current Mailing Address: New Mailing Address:

PO BOX 11370

SHADY HILLS, FL 34610 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIMPSON, CINDY

18040 APPLEJACK CT

SPRING HILL, FL 34610 US

DOLLAR, DAVID

16627 BOSLEY DRIVE

SPRING HILL, FL 34610 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: DAVID DOLLAR 02/27/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 SIMPSON, CINDY
 Name:
 DOLLAR, DAVID

 Address:
 18040 APPLEJACK ST
 Address:
 16627 BOSLEY DRIVE

 City-St-Zip:
 SPRINGHILL, FL 34610
 City-St-Zip:
 SPRINGHILL, FL 34610

Title: AS ( ) Delete Title: AS (X) Change ( ) Addition Name: MIRANDA, DAVID Name: STEWART, RHONDA

 Address:
 13396 BARLINGTON STREET
 Address:
 HELEN K DRIVE

 City-St-Zip:
 SPRING HILL, FL 34609
 City-St-Zip:
 SPRING HILL, FL 34610

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: WHITE, KAREN Name: BINDER, DOROTHY

 Name:
 WHITE, KAREN
 Name:
 BINDER, DOROTHY

 Address:
 10037 ORLAND ST,
 Address:
 16122 HELEN K DRIVE

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:
 SPRING HILL, FL 34610

Title: S () Delete Title: () Change () Addition

 Name:
 DOLLAR, KARA
 Name:

 Address:
 16627 BOSLEY DR
 Address:

 City-St-Zip:
 SPRING HILL, FL 34610
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DOROTHY BINDER T 02/27/2006