

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

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

**Current Mailing Address:**

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

**FEI Number:** 26-2783928

**Certificate of Status Desired:** No

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

REID HARDMAN, MIMI  
300 S. LAKE SHORE BLVD.  
LAKE WALES, FL 33853 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P D  
Name REID HARDMAN, MIMI PRES  
Address 300 S. LAKE SHORE BLVD.  
City-State-Zip: LAKE WALES FL 33853

Title T D  
Name ESTEVE, EDWARD VTREAS  
Address 3655 N. SCENIC HIGHWAY  
City-State-Zip: LAKE WALES FL 33898

Title V D  
Name WELBORN, SUSAN VICE D  
Address 34 REGAL COURT  
City-State-Zip: BABSON PARK FL 33827

Title SECY  
Name WEBSTER-BIEHL, DIANA SECY  
Address 366 WEST A STREET  
City-State-Zip: FROSTPROOF FL 33843

*I hereby 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 all other like empowered.*

**SIGNATURE:** EDWARD V ESTEVE

**TREASURER**

**04/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date