

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005310

Entity Name: RIDE NATURE CORPORATION**Current Principal Place of Business:**3100 BAILEY LANE
NAPLES, FL 34105**Current Mailing Address:**3100 BAILEY LANE
NAPLES, FL 34105 US**FEI Number:** 27-2763553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KOCH, MARK A
4620 ST. CROIX LN
UNIT #918
NAPLES, FL 34109 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:** MARK KOCH

01/26/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	KOCH, MARK A
Address	4620 ST. CROIX LN UNIT 918
City-State-Zip:	NAPLES FL 34109

Title	VP
Name	KOCH, SHANNON M
Address	4620 ST. CROIX LN UNIT 918
City-State-Zip:	NAPLES FL 34109

Title	BM
Name	BRESSLER, RALPH
Address	24932 FAIRWINDS LN
City-State-Zip:	BONITA SPRINGS FL 34135

Title	BM
Name	MAIN, KEN
Address	3643 NORTH ROAD
City-State-Zip:	NAPLES FL 34101

Title	BM
Name	LAMPION, CARLOS
Address	6624 TANNIN LANE #A
City-State-Zip:	NAPLES FL 34109

Title	BOARD MEMBER
Name	ASHFORD, JOHN
Address	7879 GARDNER DRIVE
City-State-Zip:	NAPLES FL 34109

Title	BOARD MEMBER
Name	DAVID, GREG
Address	1943 TIMBERLINE DRIVE
City-State-Zip:	NAPLES FL 34109

Title	BOARD MEMBER
Name	GRAEVE, JOSH
Address	9650 VICTORIA LANE 301
City-State-Zip:	NAPLES FL 34109

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: SHANNON KOCH

VICE PRESIDENT

01/26/2015

Electronic Signature of Signing Officer/Director Detail

Date