

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N13000005487

**Entity Name:** FREEDOM RIDERS ACADEMY, INC.

**Current Principal Place of Business:**

1240 BAY VIEW WAY  
WELLINGTON, FL 33414

**Current Mailing Address:**

1240 BAY VIEW WAY  
WELLINGTON, FL 33414

**FEI Number:** 46-3657736

**Certificate of Status Desired:** No

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

WEISSMAN, ALAN  
1240 BAY VIEW WAY  
WELLINGTON, FL 33414 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  
Name WEISSMAN, ALISON  
Address 1240 BAY VIEW WAY  
City-State-Zip: WELLINGTON FL 33414

Title VP  
Name PARKER, RYAN  
Address 104 LOCUST LANE  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title S  
Name ACKERMANN, AMY  
Address 11863 WEST RAMBLING DRIVE  
City-State-Zip: WELLINGTON FL 33414

Title T  
Name WEISSMAN, ALAN  
Address 1240 BAY VIEW WAY  
City-State-Zip: WELLINGTON FL 33414

*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:** ALAN WEISSMAN

**TREASURER**

**08/08/2014**

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

\_\_\_\_\_  
Date