

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701295

FILED
Feb 10, 2009
Secretary of State

Entity Name: BIG SCRUB TRAIL RIDERS INC

Current Principal Place of Business:

40825 BABB RD
UMATILLA, FL 32784 US

New Principal Place of Business:

Current Mailing Address:

40825 BABB RD
UMATILLA, FL 32784 US

New Mailing Address:

FEI Number: 20-3995926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAIG, MARGARET A
40825 BABB RD
UMATILLA, FL 32784 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 () Delete
Name: JICHA, JAMES
Address: 43568 MAGGIE JONES ROAD
City-St-Zip: PAISLEY, FL 32767

Title: V () Delete
Name: WOODALL, RENEE
Address: HIGHWAY 42
City-St-Zip: WEIRSDALE, FL 32195

Title: T () Delete
Name: FOSS, KATHY
Address: 24117 SE HWY 42
City-St-Zip: UMATILLA, FL 32784

Title: ARS () Delete
Name: CRAIG, MARGARET A
Address: 40825 BABB RD.
City-St-Zip: UMATILLA, FL 32784

Title: RS () Delete
Name: HESTAND, ANNE
Address: 34626 THRILL HILL ROAD
City-St-Zip: EUSTIS, FL 32736

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WOODALL, RENEE
Address: PO BOX 1780
City-St-Zip: LADY LAKE, FL 32158

Title: 1V (X) Change () Addition
Name: DANIELS, JERRY
Address: PO BOX 328
City-St-Zip: WEIRSDALE, FL 32195

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

Title: S (X) Change () Addition
Name: CRAIG, MARGARET A
Address: 40825 BABB RD.
City-St-Zip: UMATILLA, FL 32784

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

Title: 2V () Change (X) Addition
Name: OGILVIE, MADGE
Address: 1124 SE 180TH STREET
City-St-Zip: WEIRSDALE, FL 32195

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: MARGARET ANN CRAIG

S

02/10/2009

Electronic Signature of Signing Officer or Director

Date