

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769781

FILED
Mar 31, 2009
Secretary of State

Entity Name: FLORIDA RANGERS, INC.

Current Principal Place of Business:

3065 US 17 SO
FT. MEADE, FL 33841 US

New Principal Place of Business:

Current Mailing Address:

3065 US 17 SO
FT. MEADE, FL 33841 US

New Mailing Address:

FEI Number: 59-2467618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JAMES EDWARD
3208 HILLTOP AVE S
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

RIGGS, DENNIS L
1335 35TH AVE N
SAINT PETERSBURG, FL 33704 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: DENNIS L RIGGS

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITE, JAMES EDWARD
Address: 3208 HILLTOP AVE
City-St-Zip: LAKELAND, FL 33803

Title: 1VP () Delete
Name: CHAPIN, DALE
Address: 7393 17TH WAY N
City-St-Zip: ST. PETERSBURG, FL

Title: 1VP () Delete
Name: MOON, DOUG
Address: 201 MCCOY
City-St-Zip: SEBRING, FL 33875

Title: T () Delete
Name: JOHNSON, RICK
Address: 3005 LEWIS RD
City-St-Zip: DOVER, FL 33527

Title: SD (X) Delete
Name: STANLEY, AARON
Address: 158 BRISTOL FOREST TR
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOON, DOUGLAS
Address: 201 MCCOY RD
City-St-Zip: SEBRING, FL 33875

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

Title: T (X) Change () Addition
Name: RIGGS, DENNIS
Address: 1335 35TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: SD (X) Change () Addition
Name: STANLEY, AARON
Address: 158 BRISTOL FOREST TR
City-St-Zip: SANFORD, FL 32771

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

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: DENNIS L RIGGS

T

03/31/2009

Electronic Signature of Signing Officer or Director

Date