

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002735

FILED
Apr 13, 2009
Secretary of State

Entity Name: RADICAL RIDERS, INCORPORATED

Current Principal Place of Business:

360 LANGFORD DR.
CHULUOTA, FL 32766

New Principal Place of Business:

884 MILLSHORE DRIVE
CHULUOTA, FL 32766

Current Mailing Address:

360 LANGFORD DR.
CHULUOTA, FL 32766

New Mailing Address:

884 MILLSHORE DRIVE
CHULUOTA, FL 32766

FEI Number: 73-1640028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KROGMAN, MICHELE
360 LANGFORD DR.
CHULUOTA, FL 32766 US

Name and Address of New Registered Agent:

KROGMAN, MICHELE
884 MILLSHORE DRIVE
CHULUOTA, FL 32766 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: MICHELE KROGMAN

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: KROGMAN, MICHELE
Address: 360 LANGFORD DR.
City-St-Zip: CHULUOTA, FL 32766

Title: VCP () Delete
Name: KROGMAN, ROBERT
Address: 360 LANGFORD DR.
City-St-Zip: CHULUOTA, FL 32766

Title: D () Delete
Name: JOHNSON, GREGG
Address: 43449 ELK RUN
City-St-Zip: STEAMBOAT, CO 80487

Title: D () Delete
Name: GROEN, DAVE
Address: 10149 S. SILVER MAPLE CIR.
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: S () Delete
Name: JONES, MARILLOU
Address: P. O. BOX 770951
City-St-Zip: STEAMBOAT, CO 80477

Title: T () Delete
Name: MURPHY, CREDA M
Address: 8818 S. DUDLEY CT.
City-St-Zip: LITTLETON, CO 80128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MICHELE KROGMAN

PC

04/13/2009

Electronic Signature of Signing Officer or Director

Date