

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000005075

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: FREE RIDERS FLORIDA, INC.

Current Principal Place of Business:

POST OFFICE BOX 691972
ORLANDO, FL 328691972

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 691972
ORLANDO, FL 328691972

New Mailing Address:

FEI Number: 59-3733896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, MARY V
10848 MYSTIC CIRCLE #102
ORLANDO, FL 32836 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: PD () Delete
Name: CARTER, MARY V
Address: 10848 MYSTIC CIRCLE #102
City-St-Zip: ORLANDO, FL 32836

Title: VD () Delete
Name: YOUNG, ERNIE
Address: 9070 ATLAS DRIVE
City-St-Zip: ST. CLOUD, FL 34773

Title: STD () Delete
Name: CLARK, NORMA
Address: 3703 BUCK JOHNSON COURT
City-St-Zip: KISSIMMEE, FL 34744

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: CLARK, NORMA
Address: 3703 BUCK JOHNSON COURT
City-St-Zip: KISSIMMEE, FL 34744

Title: TD () Change (X) Addition
Name: STARKEY, FRANK
Address: 4753 BUNTING AVENUE
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK STARKEY

TD

04/16/2002

Electronic Signature of Signing Officer or Director

Date