

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002256

FILED
Aug 17, 2006
Secretary of State

Entity Name: EVERYONE RIDES! INCORPORATED

Current Principal Place of Business:

11587 MAHOGANY RUN
FORT MYERS, FL 33913

New Principal Place of Business:

12474 PEBBLE STONE COURT
FORT MYERS, FL 33913

Current Mailing Address:

PMB 156
24600 SO TAMIAMI TRAIL #212
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 81-0646029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCCAIN, MATTHEW
11587 MAHOGANY RUN
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

MCCAIN, MATTHEW
12474 PEBBLE STONE COURT
FORT MYERS, FL 33913 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

08/17/2006

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MCCAIN, LAURIE
Address: 11587 MAHOGANY RUN
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCCAIN, LAURIE
Address: 12474 PEBBLE STONE COURT
City-St-Zip: FORT MYERS, FL 33913

I hereby certify that the information supplied with this filing does not qualify for the 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: MATTHEW MCCAIN

MR

08/17/2006

Electronic Signature of Signing Officer or Director

Date