2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# N04000003937

Entity Name: PEGASUS RISING, INC.

Current Principal Place of Business:

42 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

42 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 56-2473704 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARR, GAIL
42 SLEEPY HOLLOW TRAIL
PALM COAST, FL 32164 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: T ( ) Delete
Name: BARR, ARTHUR M
Address: 42 SLEEPY HOLLOW TRAIL
City-St-Zip: PALM COAST, FL 32164

Title: T ( ) Delete
Name: BARR, GAIL
Address: 42 SLEPPY HOLLOW TRAIL
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: BARR, GAIL
Address: 42 SLEPPY HOLLOW TRAIL
City-St-Zip: PALM COAST, FL 32164

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: GAIL BARR P 04/27/2007

Electronic Signature of Signing Officer or Director Date