2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2007
Secretary of State

DOCUMENT# N04804

Entity Name: RIDE SOLUTION, INC.

Current Principal Place of Business:

% JIM WHITTAKER
1209 WESTOVER DRIVE
PALATKA, FL 321775329

New Principal Place of Business:

JIM WHITTAKER
1209 WESTOVER DRIVE
PALATKA, FL 321775329

Current Mailing Address:

% JIM WHITTAKER
1209 WESTOVER DRIVE
PALATKA, FL 321775329

New Mailing Address:

JIM WHITTAKER
1209 WESTOVER DRIVE
PALATKA, FL 321775329

FEI Number: 59-2243380 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITTAKER, JIM
1209 WESTOVER DRIVE
PALATAKA, FL 32177 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: DURSCHER, KEVIN
Address: 662 HIGHWAY 20
City-St-Zip: HOLLISTER, FL

Title: VD ( ) Delete
Name: TORODE, WILLIAM E.,
Address: PO BOX 801
City-St-Zip: PALATKA, FL 32178

Title: SD ( ) Delete
Name: DRIGGERS, DOT,
Address: PO BOX 72
City-St-Zip: E PALATKA, FL

Title: TD ( ) Delete
Name: FLETCHER, CARL
Address: 195 HORSEMANS CLUB ROAD
City-St-Zip: PALATKA, FL

Title: D ( ) Delete
Name: WESTBURY, RICHARD,
Address: 286 ROUND LAKE ROAD
City-St-Zip: PALATKA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: TORODE, WILLIAM E.,
Address: PO BOX 801
City-St-Zip: PALATKA, FL 321780801

Title: SD (X) Change ( ) Addition
Name: DRIGGERS, DOT,
Address: PO BOX 72
City-St-Zip: E PALATKA, FL 321310072

Title: TD (X) Change ( ) Addition
Name: FLETCHER, CARL
Address: PO BOX 161
City-St-Zip: PALATKA, FL 321780161

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

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: JIM WHITTAKER ED 02/09/2007

Electronic Signature of Signing Officer or Director — Date