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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

March 6, 1996

3a. Date of Last Report 02/00/1005

3. Date Incorporated or Qualified

1996

Principal Place of Business

% V.M. WILSON

1722 PARK AVENUE

TITUSVILLE FL 32780

SIGNATURE:

DOCUMENT # N04932

(2)

Mailing Address

% V.M. WILSON

1722 PARK AVENUE

TITUSVILLE FL 32780

SOUTH EASTERN DISTANCE RIDERS ASSOCIATION, INC.

Suite, Apt. #, etc. 22 City & State City & State City & State Country Country Suite, Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for intangible tax un	5 Zip Code
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Signature, typed or printed name of registered agent and title if applicable. (NCITE: Registered Agent signature expired whom reinstating). DATE	
12. OFFICERS AND DIRECTORS 13. ADD HONS/CHANGES TO OFFICERS AND DIR	
	RECTORS IN 12
TITLE PD DELETE 11 TITLE POUL, KATHY	RECTORS IN 12 nange
NAME CASTRO, VICKI 12 NAME 4315 PACKARD DR	
STREET ADDRESS I TU DUA 1949/NA	
DAVENPORT FL 13 STREET ADDRESS TACK SOND THE 32 21 C	P
TILE VD DELETE 21TILE C.DU BODOLO DEL	hange
NAME PAUL, KATHY 12 NAME PAUL, KATHY 12 NAME RT 2 BOX 138-1	
DITY-ST-ZIP JACKSONVILLE FL 23 SIREET ADDRESS CF CE COU. 1/e, 7L 32231	
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NAME WILSON, VIRGINIA 32 NAME	_
STREET ADDRESS 1722 PARK AVE . 33 STREET ADDRESS	
CITY-ST-ZIP TITUSVILLE FL 34 CITY-ST-ZIP	
TITLE SD DELETE 4.1 TITLE	hange
NAME WAGNER, CAROLYN 4.2 NAME	
STREET ADDRESS 2400 PONDORA LN 4.3 STREET ADDRESS	
CITY-ST-ZIP CHULUOTA FL 4.4 CITY-ST-ZIP	
TITLE DELETE STITLE DEL	hange Addition
NAME 52 NAME	· -
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-S1-ZIP 5.4 CITY-S1-ZIP	
	hange Addition
NAME 62 NAME	-
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP 64 CITY-ST-ZIP	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida	
certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect 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; a	Statutes, I further
appears in Block 12 or Block 13 if changed, or on an attachment with an address.	ct as if made under