

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006508

FILED  
Mar 31, 2010  
Secretary of State

**Entity Name:** TIANVICA RIDING ACADEMY, INCORPORATED.

**Current Principal Place of Business:**

1704 PARKER ROAD  
LAKLELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7301  
LAKELAND, FL 33807

**New Mailing Address:**

**FEI Number:** 20-3895582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEADOWS, ROGER R ROGER M  
1704 PARKER ROAD  
LAKELAND, FL 33811 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: DP  
Name: MEADOWS, ROGER O  
Address: 1704 PARKER ROAD  
City-St-Zip: LAKELAND, FL 33811

Title: DS  
Name: MEADOWS, SARA  
Address: 1704 PARKER ROAD  
City-St-Zip: LAKELAND, FL 33811

Title: DVP  
Name: ORR, DONNA J  
Address: 3323 IMPERIAL LANE  
City-St-Zip: LAKELAND, FL 33812

Title: DT  
Name: MUNSON, SHARON  
Address: 1151 LONGWOCK OAKS BLVD  
City-St-Zip: LAKELAND, FL 33811

Title: D  
Name: WILHELM, THERESA  
Address: 2017 LAKE BENTLEY COURT  
City-St-Zip: LAKELAND, FL 33803

Title: D  
Name: BURDETT, DEBRA  
Address: 3200 STATE ROAD 60 W  
City-St-Zip: BARTOW, FL 33830

I hereby 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 all other like empowered.

SIGNATURE: ROGER MEADOWS

DP

03/31/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date