

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90187 048 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                     |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # N07000001370</b><br>1. Entity Name<br>RIDING FOR THE HANDICAPPED, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 |                                                                                     |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| Principal Place of Business<br>602 GRENADA WAY<br>NICEVILLE, FL 32578                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                 |                                                                                     | Mailing Address<br>602 GRENADA WAY<br>NICEVILLE, FL 32578                                                                                                                                                         |                                                                                          |                                                                              |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                 | 3. Mailing Address                                                                  |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 | Suite, Apt. #, etc.                                                                 |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                 | City & State                                                                        |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                         | Zip                                                                                 | Country                                                                                                                                                                                                           | 4. FEI Number<br><div style="font-family: cursive; font-size: 1.2em;">26-0338262</div>   |                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                     |                                                                                                                                                                                                                   | Applied For<br><input type="checkbox"/> Not Applicable                                   |                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                     |                                                                                                                                                                                                                   | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |                                                                              |
| 6. Name and Address of Current Registered Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                 |                                                                                     | 7. Name and Address of New Registered Agent                                                                                                                                                                       |                                                                                          |                                                                              |
| WELTON & WILLIAMSON, LLC<br>1020 FERDON BLVD. SOUTH<br>CRESTVIEW, FL 32536                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                     | Name <div style="font-family: cursive; font-size: 1.2em;">Ron Bell</div><br>Street Address (P.O. Box Number is Not Acceptable)<br><br>City <div style="font-family: cursive; font-size: 1.2em;">FL</div> Zip Code |                                                                                          |                                                                              |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                                                                     |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| SIGNATURE <div style="font-family: cursive; font-size: 1.2em;">Ron Bell</div><br><small>Signature, typed or printed name of registered agent and title if applicable</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                 |                                                                                     | DATE <div style="font-family: cursive; font-size: 1.2em;">4-24-08</div><br><small>(NOTE: Registered Agent signature required when reinstating)</small>                                                            |                                                                                          |                                                                              |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                                   | <b>\$5.00 May Be<br/>Added to Fees</b>                                                   |                                                                              |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                 |                                                                                     |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                 |                                                                                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                                                                                             |                                                                                          |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PD<br>FORBES, MICHAEL<br>602 GRENADA WAY<br>NICEVILLE, FL 32578 | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                | PD<br>Forbes, Michael                                                                    | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D<br>KRAUSE, RICHARD<br>602 GRENADA WAY<br>NICEVILLE, FL 32578  | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                | D<br>Ron Bell                                                                            | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D<br>HENLEY, BEN<br>602 GRENADA WAY<br>NICEVILLE, FL 32578      | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                | D<br>Tom CARNEY<br>6339 Garden City Rd<br>Crestview, Florida 32539                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                 | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                |                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                 | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                |                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                 | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                |                                                                                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                 |                                                                                     |                                                                                                                                                                                                                   |                                                                                          |                                                                              |
| SIGNATURE: <div style="font-family: cursive; font-size: 1.2em;">Michael E. Forbes</div><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                 |                                                                                     | Date <div style="font-family: cursive; font-size: 1.2em;">4-24-08</div> (850) 537-7754<br><small>Daytime Phone #</small>                                                                                          |                                                                                          |                                                                              |