

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002550

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** FLY DRIVE RIDE FOR MS, INC.

**Current Principal Place of Business:**

4740 APACHE AVE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4740 APACHE AVE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 20-8589473

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESTES, JANE M  
4740 APACHE AVE  
JACKSONVILLE, FL 32210 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: D  
Name: ESTES, JANE M  
Address: 4740 APACHE AVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D  
Name: HARBISON, STUART  
Address: 4314 PAWNEE ST  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D  
Name: MASON, KIM  
Address: 3730 RICHMOND ST  
City-St-Zip: JACKSONVILLE, FL 32205

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:** JANE M. ESTES

PRES

04/29/2010

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

\_\_\_\_\_  
Date