

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007103

FILED
Feb 02, 2012
Secretary of State

Entity Name: RIDING WITH ANGELS, INC.

Current Principal Place of Business:

229 EAST STUART AVENUE
SUITE 9
LAKE WALES, FL 33853

New Principal Place of Business:

217 NORTH SCENIC HIGHWAY
FROSTPROOF, FL 33843

Current Mailing Address:

229 EAST STUART AVENUE
SUITE 9
LAKE WALES, FL 33853

New Mailing Address:

217 NORTH SCENIC HIGHWAY
FROSTPROOF, FL 33843

FEI Number: 27-0637659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMITH, ROSEMARY
285 LAKE AVENUE
LOT 37
FROSTPROOF, FL 33843 US

Name and Address of New Registered Agent:

SMITH, ROSEMARY
285 LAKE AVENUE
LOT 35
FROSTPROOF, FL 33843 US

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: ROSEMARY SMITH

02/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SMITH, ROSEMARY
Address: 285 LAKE AVENUE #35
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: CALHOUN, AMANDA
Address: 285 LAKE AVENUE # 35
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: ROGER, SMITH
Address: 285 LAKE AVENUE # 35
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: WRIGHT, DALE
Address: 128 AVE. D SW
City-St-Zip: WINTER HAVEN, FL 33880

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: ROSEMARY SMITH

PRES

02/02/2012

Electronic Signature of Signing Officer or Director

Date