2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009604

FILED Feb 01, 2011 Secretary of State

Entity Name: SPECIAL NEEDS RIDE WITH EASE INC. % HORSES FOR OUR HEROES

Current Principal Place of Business: New Principal Place of Business:

24438 NOVA LANE 24438 NOVA LANE

PORT CHARLOTTE, FL 33980 27 PORT CHARLOTTE, FL 33980

Current Mailing Address: New Mailing Address:

2175 BEACON DR. 24438 NOVA LANE

PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33980

FEI Number: 27-4702939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GARDNER, LORREN R PHD CASTRONOVA, KATHARINE M 2175 BEACON DR 24438 NOVA LANE

PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33980 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: KATHARINE M CASTRONOVA 02/01/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: EDIR

Name: CASTRONOVA, KATHARINE M

Address: 24438 NOVA LANE

City-St-Zip: PORT CHARLOTTE, FL 33980

Title: CP

Name: CASSA, WILLIAM

Address: 25188 MARION AVENUE, APT. B107

City-St-Zip: PUNTA GORDA, FL 33950

Title: TRES

Name: AVERY, JANET

Address: 1509 HARMONY DRIVE

City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SEC

Name: HABURA, KATHLEEN P

Address: 1313 GONDOLA PARK DRIVE

City-St-Zip: VENICE, FL 34292

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: KATHLEEN P HABURA SEC 02/01/2011