2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42268

FILED Feb 25, 2007 Secretary of State

Entity Name: SHADY HILLS RAIDERS, INCORPORATED

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

15480 GREENGLEN LN SPRING HILL, FL 34610 US

Current Mailing Address: New Mailing Address:

PO BOX 11370

SHADY HILLS, FL 34610 US

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

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

DOLLAR, DAVID HALL, DAVID R 16627 BOSLEY DRIVE 14915 BOLAND AVE

SPRING HILL, FL 34610 US SPRING HILL, FL 34610 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: DAVID HALL 02/25/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 DOLLAR, DAVID
 Name:
 STEWART, RONDA S

 Address:
 16627 BOSLEY DRIVE
 Address:
 18203 GREENSBORO

 City-St-Zip:
 SPRINGHILL, FL 34610
 City-St-Zip:
 SPRING HILL, FL 34610

Title: AS () Delete Title: AS (X) Change () Addition Name: STEWART, RHONDA Name: PAYNE, LESLEY

Address: HELEN K DRIVE Address: 15734 DAYBREEZE DR.
City-St-Zip: SPRING HILL, FL 34610 City-St-Zip: SPRING HILL, FL 34610

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BINDER, DOROTHY
 Name:
 HALL, DAVID R

 Address:
 16122 HELEN K DRIVE
 Address:
 14915 BOLAND AVE

 City-St-Zip:
 SPRING HILL, FL 34610
 City-St-Zip:
 SPRING HILL, FL 34610

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$

 Name:
 DOLLAR, KARA
 Name:
 CLARK, KRISTY

 Address:
 16627 BOSLEY DR
 Address:
 18051 ALT ST.

 City-St-Zip:
 SPRING HILL, FL 34610
 City-St-Zip:
 SPRING HILL, FL 34610

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID HALL T 02/25/2007