

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47322

FILED
May 01, 2008
Secretary of State

Entity Name: SUWANNEE RIVER RIDING CLUB, INC.

Current Principal Place of Business:

9132 254TH TERRACE
BRANFORD, FL 32008

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 826
BRANFORD, FL 32008

New Mailing Address:

FEI Number: 59-3111780 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BULLOCK, STEPHEN C
116 NW COLUMBIA AVENUE
LAKE CITY, FL 32056 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: P () Delete
Name: SUMMERS, DARRELL
Address: 3969 256TH STREET
City-St-Zip: O BRIEN, FL 32071

Title: S () Delete
Name: PARK, LISA
Address: 1453 SW BIRLEY AVENUE
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: MATHEWS, PATTY
Address: 411 SW SALLIEWOOD CT
City-St-Zip: FT WHITE, FL 32038

Title: D () Delete
Name: BALDI, DENNIS
Address: 6919 NW 22ND CT
City-St-Zip: BELL, FL 32619

Title: D () Delete
Name: HUNT, BUDDY
Address: 26887 CR 137
City-St-Zip: O'BRIEN, FL 32071

Title: D () Delete
Name: THOMPSON, GARRY
Address: 18063 99TH DRIVE
City-St-Zip: MCALPIN, FL 32062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BYRD, TONYA
Address: 7986 264TH ST
City-St-Zip: BRANFORD, FL 32008

I hereby certify that the information supplied with this filing does not qualify 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: TONYA BYRD

T

05/01/2008

Electronic Signature of Signing Officer or Director

Date