2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001017

Entity Name: GYPSY RIDERS, INC.

City-St-Zip:

JACKSONVILLE, FL

FILED Apr 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12581 SAW PIT ROAD 12581 SAWPIT ROAD JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32226 **Current Mailing Address: New Mailing Address:** 12581 SAW PIT ROAD 12581 SAWPIT ROAD JACKSONVILLE, FL 32226 JACKSONVILLE, FL 32226 FEI Number: 59-3186591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH HULSEY & BUSEY 1800 FIRST UNION NATIONAL BANK TOWER 225 WATER STREET JACKSONVILLE, FL 32202 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GRINER, DERRELL D Name: Name: Address: 11701 CISCO GARDEN ROAD Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition Name: MOORE, MARTHA Name: MOORE, MARTHA Address: 12581 SAW PIT ROAD Address: 12581 SAWPIT ROAD City-St-Zip: JACKSONVILLE, FL 32226 City-St-Zip: JACKSONVILLE, FL 32226 Title: () Delete Title: () Change () Addition GRINER, KIM Name: Name: 11701 CISCO GARDEN ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: GRINER, BETTY J Name: 11701 CISCO GARDEN ROAD Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: MARTHA MOORE TD 04/12/2004