## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001023

Entity Name: TREASURE COAST TRAIL RIDERS, INC.

FILED Apr 15, 2009 Secretary of State

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

3760 DEVINE RD. 2566 SW HINCHMAN ST

FORT PIERCE, FL 34981 US PORT ST LUCIE, FL 34984 US

Current Mailing Address: New Mailing Address:

PO BOX 690126

VERO BEACH, FL 329690126 US

FEI Number: 59-3220615 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:

HARRIS, KENNETH DAYAN, PATRICK 3760 DEVINE RD. 2566 SW HINCHMAN ST

FORT PIERCE, FL 34981 US PORT ST LUCIE, FL 34984 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: PATRICK DAYAN 04/15/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 JORDAN, PHIL
 Name:
 JORDAN, PHIL

 Address:
 7300 20TH ST. LOT #613
 Address:
 7300 20TH ST. LOT #613

 City-St-Zip:
 VERO BEACH, FL 32966 US
 City-St-Zip:
 VERO BEACH, FL 32966 US

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

Name: PERRY, DALLAS Name: AYBAR, EMERSON
Address: 514 SW JEANNE AVE. Address: 522 SW MILLARD RD

City-St-Zip: PORT ST. LUCIE, FL 34953 US City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FRANKLIN, JOHN
 Name:

 Address:
 1620 TRUMPET LN.
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34983 US
 City-St-Zip:

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

 Name:
 HARRIS, KENNETH
 Name:
 DAYAN, PATRICK

 Address:
 3760 DEVINE RD.
 Address:
 2566 SW HINCHMAN ST

 City-St-Zip:
 FT. PIERCE, FL 34981 US
 City-St-Zip:
 PORT ST LUCIE, FL 34984 US

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: PATRICK DAYAN TR 04/15/2009