

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000127020

Entity Name: RIDE-N-OUR ELEVATOR INC

FILED  
Mar 30, 2006  
Secretary of State

## Current Principal Place of Business:

1200 NE 48 STREET  
SUITE #4  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

## Current Mailing Address:

1200 NE 48 STREET  
SUITE #4  
POMPANO BEACH, FL 33064

## New Mailing Address:

FEI Number: 26-0097646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIDENOUR, JIM  
1029 SE 14 STREET  
DEERFIELD BEACH, FL 33441 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RIDENOUR, JIM  
Address: 1029 SE 14 STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VD ( ) Delete  
Name: ROESSLER, NORMAN L  
Address: 12903 LAKE TREE LN  
City-St-Zip: HUDSON, FL 34669

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM RIDENOUR

P

03/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date