

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022772

FILED
Jan 13, 2009
Secretary of State

Entity Name: INNOVATIVE RIDE SOLUTIONS, INC.

Current Principal Place of Business:

405 CENTRAL PARK DR
SANFORD, FL 327716670

New Principal Place of Business:

1100 CENTRAL PARK DR. STE 1100
SANFORD, FL 327716305

Current Mailing Address:

405 CENTRAL PARK DR
SANFORD, FL 327716670

New Mailing Address:

1100 CENTRAL PARK DR. STE 1100
SANFORD, FL 327716305

FEI Number: 20-4321454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDEN, KERBY B
831LONGWOOD MARKHAM RD
SANFORD, FL 327718318 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: D () Delete
Name: WALDEN, KERBY B
Address: 405 CENTRAL PARK DR
City-St-Zip: SANFORD, FL 327716670

Title: D () Delete
Name: EDWARDS, DAVID P
Address: 405 CENTRAL PARK DR
City-St-Zip: SANFORD, FL 327716670

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WALDEN, KERBY B
Address: 1100 CENTRAL PARK DR. STE 1100
City-St-Zip: SANFORD, FL 327716305

Title: D (X) Change () Addition
Name: EDWARDS, DAVID P
Address: 1100 CENTRAL PARK DR. STE 1100
City-St-Zip: SANFORD, FL 327716305

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

SIGNATURE: KIRBY B WALDEN

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

Date