

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000026735

FILED
Apr 25, 2008
Secretary of State

Entity Name: FREE RIDE SURF & SPORT, INC.

Current Principal Place of Business:

420 NW 13TH ST
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

420 NW 13TH ST
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-3434341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLIKES, THOMAS
420 NW 13TH ST
GAINESVILLE, FL 32601 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: V () Delete
Name: GLIKES, TOM
Address: 9311 NW 143 ST
City-St-Zip: ALACHUA, FL 32615

Title: D () Delete
Name: GLIKES, RICHARD
Address: 210 NW 79TH DR
City-St-Zip: GAINESVILLE, FL 32607

Title: P (X) Delete
Name: BURCH, MEREDITH
Address: 420 NW 13 ST
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GLIKES, TOM
Address: 9311 NW 143 ST
City-St-Zip: ALACHUA, FL 32615

Title: CEO (X) Change () Addition
Name: GLIKES, RICHARD
Address: 66 FAIRFIELD LANE
City-St-Zip: CHESTER SPRINGS, PA 19425

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

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: TOM GLIKES

P

04/25/2008

Electronic Signature of Signing Officer or Director

Date