

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000097480

Entity Name: RIDER INSURANCE GROUP, INC.

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

9180 ESTERO PARK COMMONS BLVD
STE 9
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

9180 ESTERO PARK COMMONS BLVD
STE 9
ESTERO, FL 33928

New Mailing Address:

FEI Number: 65-0984213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDER, JENNIFER J
12451 GATEWAY GREENS DR
FT. MYERS, FL 33913 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: RIDER, VICTORIA
Address: 1408 WINKLER AVE.
City-St-Zip: FORT MYERS, FL 33901

Title: S () Delete
Name: RIDER, JENNIFER
Address: 12451 GATEWAY GREENS DR
City-St-Zip: FORT MYERS, FL 33913

Title: V () Delete
Name: RIDER, JOSEPH J
Address: 1408 WINKLER AVE
City-St-Zip: FORT MYERS, FL 33901

Title: T () Delete
Name: RIDER, JENNIFER J
Address: 12451 GATEWAY GREENS DR
City-St-Zip: FORT MYERS, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JENNIFER J RIDER

S

04/01/2008

Electronic Signature of Signing Officer or Director

Date