

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001662

**FILED**  
**Jan 27, 2016**  
**Secretary of State**  
**CC9628297258**

**Entity Name:** THE PROFESSIONAL RIDERS ORGANIZATION, INC.

**Current Principal Place of Business:**

3200 SAVANNAH PL.  
VERO BEACH, FL 32963

**Current Mailing Address:**

3200 SAVANNAH PL.  
VERO BEACH, FL 32963

**FEI Number: 27-1597302**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LENDL, SAMANTHA  
3200 SAVANNAH PLACE  
VERO BEACH, FL 32963 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           DUTTON, PHILLIP  
Address        248 HOOD ROAD  
City-State-Zip: WEST GROVE PA 19390

Title           VP  
Name           DAVIDSON, BRUCE JR.  
Address        5351 NW 25TH LOOP  
City-State-Zip: OCALA FL 34482

Title           D  
Name           LENDL, SAMANTHA  
Address        3200 SAVANNAH  
City-State-Zip: VERO BEACH FL 32963

Title           TREASURER  
Name           RICK, WALLACE  
Address        PO 10437  
City-State-Zip: TALLAHASSEE FL 32302

Title           PRESIDENT  
Name           SPRINGER, ALLISON  
Address        PO BOX 427  
City-State-Zip: UPPERVILLE VA 20185

Title           SECRETARY  
Name           OCRANT, YVONNE  
Address        222 NORTH LASALLE STREET  
                  SUITE 300 CHICAGO  
City-State-Zip: CHICAGO IL 60601

*I hereby 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 all other like empowered.*

**SIGNATURE: SAMANTHA LENDL**

**EXECUTIVE DIRECTOR**

**01/27/2016**

Electronic Signature of Signing Officer/Director Detail

Date