


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000077938 1. Entity Name RYBOLT'S RESERVE DEVELOPMENT CORPORATION	
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Principal Place of Business 1017 E. SOUTH ST. ORLANDO, FL 32801	Mailing Address 1017 E. SOUTH ST. ORLANDO, FL 32801
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02022006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3600907	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent HILL, CAREY L 390 N. ORANGE AVE., STE 2180 ORLANDO, FL 32801
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CASEY, DENNIS J 360 E. TROTTERS DR. MAITLAND, FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BOLEN, JAMES L 2 ISLE OF SICILY WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HILL, CAREY L 1921 HOFFNER AVE. ORLANDO, FL 32809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000486151
04/13/06-80026-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **Dennis J. Casey** **3/28/06** **407-895-5578**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #