## **2008 FOR PROFIT CORPORATION**

ANNUAL REPORT

**DOCUMENT # 240458** 1. Entity Name

**RAKÉR CORPORATION** 

**FILED Secretary of State** 

Principal Place of Business 1123 SHIPWATCH CIR. TAMPA, FL 33602-5785 Mailing Address

The state of the s

DO NOT WRITE IN THIS SPACE

1123 SHIPWATCH CIR. TAMPA, FL 33602-5785



01082008 No Chg-P

CR2E034 (11/05)

4. FEI Number 59-0908912

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCNEILL, HAROLD L 1123 SHIPWATCH CIRCLE



| IAMPA, F  | L 33602  |   | 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: Regi                        | stered Agent signature required when reinstating)  | DATE   |
|   | E NOW!!! FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.00    | Election Campaign F Trust Fund Contributi         |  |  |
| 10.   | OFFICERS AND DIREC   | CTORS   | Parish and the second of the second  | 。  |
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| NAME  | MCNEILL, HAROLD L  |   |  | ######################################   |
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| CITY-ST-ZIP   | TAMPA, FL 33602  | · <del>· · · · · · · · · · · · · · · · · · </del> |  |  |
| TITLE   | SD   |   |  |  |
| NAME  | MCNEILL, PRENTISS  |   |  |  |
| STREET ADDRESS  | 52 LONDONDERRY ROAD  |   | - L  | NOT WRITE  |
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| 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

SIGNATURE: