

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282580

Entity Name: RAYMOND INVESTMENTS, INC.

FILED  
Jan 31, 2007  
Secretary of State

## Current Principal Place of Business:

C/O JAMES M WALLACE  
420 OLDMAIN ST., P.O. BOX 1889  
BRADENTON, FL 342061889 US

## Current Mailing Address:

C/O JAMES M WALLACE  
420 OLDMAIN ST., P.O. BOX 1889  
BRADENTON, FL 342061889 US

## New Principal Place of Business:

C/O JAMES M WALLACE  
420 OLD MAIN STREET  
BRADENTON, FL 34205 US

## New Mailing Address:

C/O JAMES M WALLACE  
420 OLD MAIN ST., P.O. BOX 1889  
BRADENTON, FL 342061889 US

FEI Number: 59-1315234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALLACE, JAMES M  
420 OLD MAIN ST.  
BRADENTON, FL 34205 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: SD ( ) Delete  
Name: WALLACE, D.H.,  
Address: 420 OLD MAIN ST.  
City-St-Zip: BRADENTON, FL 00000,

Title: PD ( ) Delete  
Name: WALLACE, JAMES M,  
Address: 420 OLD MAIN ST.  
City-St-Zip: BRADENTON, FL 00000,

Title: VD ( ) Delete  
Name: CALANDRA, GAIL M,  
Address: 420 OLD MAIN ST.  
City-St-Zip: BRADENTON, FL 00000,

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES M. WALLACE

P

01/31/2007

Electronic Signature of Signing Officer or Director

Date