2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282671

FILED Feb 19, 2007 Secretary of State

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Entity Nan	ne: DICK BAIR	RD INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	GHWAY 17-92 OD, FL 32750				
Current Mailing Address:			New Mailing Address:		
PO BOX 52 LONGWO	21400 OD, FL 327521	400 US			
FEI Number:	59-1197628	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	GEWOOD ST	US	BLECHMAN, MARK S 1521 MOUNT VERNO ORLANDO, FL 32803	N STREET	
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: MARK S. BLECHMAN				02/19/2007	
	Electroni	c Signature of Registered Age	nt	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	RAY, WILLIAM D 2724 N HWY 17- LONGWOOD, FL	92	Title: Name: Address: City-St-Zip: Title:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip:	RAY, BRIAN D 2724 N HWY 17- LONGWOOD, FL	92	Name: Address: City-St-Zip:	() onango () / namo	
Title: Name: Address: City-St-Zip:	VP () I FRANK, J. MICH 2724 N HWY 17- LONGWOOD, FL	92	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	STD ()I	Delete	Title:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: W. DAVID RAY, III PD 02/19/2007

2724 N HIGHWAY 17-92

LONGWOOD, FL 32750

Address:

City-St-Zip: