

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 338786

Entity Name: RAY ROUTH, INC.

FILED  
Apr 27, 2005  
Secretary of State

**Current Principal Place of Business:**

1502 N. LIME AVENUE  
P.O. BOX 4067  
SARASOTA, FL 34230

**New Principal Place of Business:**

**Current Mailing Address:**

1502 N. LIME AVENUE  
P.O. BOX 4067  
SARASOTA, FL 34230

**New Mailing Address:**

FEI Number: 59-1231809      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ROUTH, ROSIE  
6841 PORTER RD  
SARASOTA, FL 34240      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: P ( ) Delete  
Name: ROUTH, ROSIE,  
Address: 6841 PORTER RD  
City-St-Zip: SARASOTA, FL 34240

Title: S ( ) Delete  
Name: JACKSON, GARY  
Address: 7593 RICHARDSON ROAD  
City-St-Zip: SARASOTA, FL 34240

Title: VD ( ) Delete  
Name: ROUTH, RAY JR.,  
Address: 6901 NW 210TH STREET  
City-St-Zip: MICANOPY, FL 32667

Title: T ( ) Delete  
Name: ROUTH, SCOTT  
Address: 5406 MINK RD  
City-St-Zip: SARASOTA, FL

**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:

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 Section 119.07(3)(i), 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: ROSIE ROUTH

P

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date