

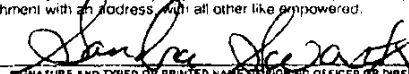
2007 FOR PROFIT CORPORATION ANNUAL REPORT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03-27-2007 90019 045 ***150.00

DOCUMENT #340223			
1. Entity Name REDINGTON TOWERS, INC.			
Principal Place of Business PO BOX 14134 CLEARWATER, FL 33766		Mailing Address PO BOX 14134 CLEARWATER, FL 33766	
2. Principal Place of Business - No P.O. Box # 201 E. Kennedy Blvd #420 Suite, Apt. #, etc. Suite 420		3. Mailing Address 201 E. Kennedy Blvd. #420 Suite, Apt. #, etc. Suite 420	
City & State Tampa, Florida		City & State Tampa, Florida	
Zip 33602	Country U.S.A.	Zip 33602	Country U.S.A.
4. FEI Number 59-1265918		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCRORY, RICHARD J. 540-4TH ST. NORTH ST PETERSBURG, FL 33701		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 renouncing) (DA)			
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHWARTZ, SANDRA 2706 LITTLE ROAD VALRICO, FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOLDBERG, CHARLES 7 DEEPDALE DR GREAT NECK, NY 11021 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: 		7/18/07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

Corp never received rejection notice per CPA, Perez & Company. SS