

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 649837

FILED
Apr 24, 2006
Secretary of State

Entity Name: RAINMAKER ROD COMPANY, INC.

Current Principal Place of Business:

511 29TH ST NW
NAPLES, FL 34120

New Principal Place of Business:

511 29TH ST NW
NAPLES, FL 34120 US

Current Mailing Address:

511 29TH ST NW
NAPLES, FL 34120

New Mailing Address:

511 29TH ST NW
NAPLES, FL 34120 US

FEI Number: 59-1968677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, PATRICIA
511 29TH ST NW
NAPLES, FL 34120 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: WILSON, RICHARD M,
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120

Title: V () Delete
Name: WILSON, RICHARD BRIA, N
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120

Title: ST () Delete
Name: WILSON, PATRICIA,
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILSON, RICHARD M,
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120 US

Title: V (X) Change () Addition
Name: WILSON, RICHARD BRIA, N
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120 US

Title: ST (X) Change () Addition
Name: WILSON, PATRICIA,
Address: 511 29TH ST NW
City-St-Zip: NAPLES, FL 34120 US

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: PATRICIA WILSON

ST

04/24/2006

Electronic Signature of Signing Officer or Director

Date