

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 653110

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: THE RYALS CORPORATION

**Current Principal Place of Business:**

843 EAST NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

2018 MELBOURNE CT  
201  
MELBOURNE, FL 32901

**Current Mailing Address:**

PO BOX 2976  
MELBOURNE, FL 32902

**New Mailing Address:**

PO BOX 2076  
MELBOURNE, FL 32902

FEI Number: 59-1956609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RYALS, JACK L.  
843 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901 US

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

RYALS, JACK L.  
2018 MELBOURNE CT  
201  
MELBOURNE, FL 32901 US

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: JACK RYALS

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RYALS, JACK L.  
Address: 843 E. NEW HAVEN AVE.  
City-St-Zip: MELBOURNE, FL

Title: STD ( ) Delete  
Name: RYALS, SHERRY W.  
Address: 843 E. NEW HAVEN AVE.  
City-St-Zip: MELBOURNE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RYALS, JACK L.  
Address: 843 E. NEW HAVEN AVE.  
City-St-Zip: MELBOURNE, FL 32901 US

Title: STD (X) Change ( ) Addition  
Name: RYALS, SHERRY W.  
Address: 2018 MELBOURNE CT  
City-St-Zip: MELBOURNE, FL 32901 US

I hereby certify that the information supplied with this filing does not qualify 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: JACK L. RYALS

PRES

04/24/2009

Electronic Signature of Signing Officer or Director

Date