## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 28, 2008 08:00 AM **DOCUMENT #660832** Secretary of State RIVERBEND CONSTRUCTION COMPANY, INC. Principal Place of Business Mailing Address 40 SUNSET BAY DR. 40 SUNSET BAY DR. BELLEAIR, FL 33756 BELLEAIR, FL 33756 01242008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3310236 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YOUNGBLOOD, F.B. DO NOT WRITE 5765 BRITANNIA DR SARASOTA, FL 34231 IN THIS SPACE 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 reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE YOUNGBLOOD, WILLIAM H. NAME STREET ADDRESS 40 SUNSET BAY DR. BALLEAIR, FL 33756 CITY-ST-ZIP 000000800729 01/31/08-80028-015 150.00 TITLE NAME YOUNGBLOOD, F B STREET ADDRESS **5765 BRITTANIA** SARASOTA, FL 34231 City-St-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling 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 by execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all pulser like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

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