

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006941

FILED
May 19, 2008
Secretary of State

Entity Name: JOHN RYAN COMPANY, INC..

Current Principal Place of Business:

149 CAMELOT DRIVE
PLYMOUTH, MA 02360

New Principal Place of Business:

Current Mailing Address:

149 CAMELOT DRIVE
PLYMOUTH, MA 02360

New Mailing Address:

FEI Number: 04-3304788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, JOHN
1801 CLACTON DR.
ORLANDO, FL 32837 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RYAN, JOHN S
Address: 61 RESERVOIR PARK DR
City-St-Zip: ROCKLAND, MA 02370

Title: T () Delete
Name: BURNS, EDWARD J
Address: 36 MAGNOLIA DR
City-St-Zip: NORTH ATTLEBORO, MA 02760

Title: VP () Delete
Name: MORRISSEY, JOSEPH
Address: 72 DEERFIELD PATH
City-St-Zip: MIDDLEBORO, MA 02346

Title: VP () Delete
Name: WHITE, JOHN H
Address: 84 CENTRAL ST
City-St-Zip: ABINGTON, MA 02351

Title: VP () Delete
Name: BANKS, RICHARD
Address: 560 GROVELAND STREET
City-St-Zip: ABINGTON, MA 02351

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN RYAN

Electronic Signature of Signing Officer or Director

PRES

05/19/2008

_____ Date