

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2007 MAR 16 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F06000001598	
1. Entity Name RITZ-CRAFT CORPORATION OF NORTH CAROLINA, INC.	

Principal Place of Business 15 INDUSTRIAL PARK RD. MIFFLINBURG, PA 17844	Mailing Address 15 INDUSTRIAL PARK RD. PO BOX 70 MIFFLINBURG, PA 17844
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2. Principal Place of Business No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc	Suite, Apt. #, etc
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City & State	City & State
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Zip	Country	Zip	Country
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02282007 Chg-P CR2E034 (12/06)

4. FEI Number 20-1703376	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 if not applicable (NOTE: Registered Agent's signature required when removing agent) DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	DP JOHN, PAUL D 6155 PLEASANT GROVE RD. MIFFLINBURG, PA 17844 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition 600089236116 03/19/07--01032--001 **26.25
TITLE NAME STREET ADDRESS CITY ST ZIP	DV JOHN, ERIC W R.R. 1, BOX 91 WINFIELD, PA 17889 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition 600089236116 02/27/07--01060--006 **25.00
TITLE NAME STREET ADDRESS CITY ST ZIP	D JOHN, PAUL R 378 GOLDENGATE POINT UNIT #6 SARASOTA, FL 34236 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D RITZENTHALER, DON D L 7218 WESTMORELAND DRIVE SARASOTA, FL 34243 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D RONEY, ROBERT J 2528 MONTEREY STREET SARASOTA, FL 34231 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D CUNNINGHAM, GLENN M RD 2, BOX 336A SUNBURY, PA 17801 ☒ 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 an officer, trustee, receiver, or other person empowered.

SIGNATURE: Paul D. John 3/9/07 570-966-1053
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

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