

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

DOCUMENT # F51720

1. Entity Name
RODCO, INC.



Principal Place of Busin-

2976 ST RD 776
VENICE FL 34293
US
Jean R Rodrigue
24130 Harbor View Rd
Port Charlotte FL 33980-2222

Mailing Address

2976 ST RD 776
VENICE FL 34293
US
Jean R Rodrigue
24130 Harbor View Rd
Port Charlotte FL 33980-2225

2. Principal Place of Business - No P.O. Box #

24130 Harbor View Rd
Suite, Apt. #, etc.

3. Mailing Address

24130 Harbor View Rd
Suite, Apt. #, etc.

City & State

Port Charlotte FL

Zip

33980-2225

Country

US

City & State

Port Charlotte FL

Zip

33980-2225

Country

US

4. FEI Number

59-2125921

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RODRIGUE, JEAN R
2976 ST RD 776
VENICE FL 34293

Jean R Rodrigue
24130 Harbor View Rd
Port Charlotte FL 33980-2225



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7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

24130 Harbor View Rd

City

Port Charlotte

FL

Zip Code
33980-2225

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY ST ZIP	PVPD RODRIGUE, JEAN R. 2976 SR 776 VENICE, FL 00000	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	PVPD Jean R. Rodrigue 24130 Harbor View Rd Port Charlotte FL 33980-2225	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	ST RODRIGUE, JEAN L. 2976 SR 776 VENICE, FL 00000	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	STO Jean L. Rodrigue 5231 Pampano Venice FL 34293	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: *Jean R. Rodrigue* *Jean R. Rodrigue* 2/7/07 941-468-6105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/07

941-468-6105
Calling Phone #