2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # G41315

1. Entity Name
THE REMINGTON COMPANY

Principal Place of Business	Mailing Address
817 DOUGLAS AVE., SUITE #177 ALTAMONTE SPRINGS, FL 32714	817 DOUGLAS AVE., SUITE 177 ALTAMONTE SPRINGS, FL 32714

DO NOT WRITE IN THIS SPACE

02202008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-2300759	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PALKA, GREGORY A
817 DOUGLAS AVENUE
SUITE 177
ALTAMONTE SPRINGS, FL 32714

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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 title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

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

10.	OFFICERS AND DIRECTORS
TITLE	DPS
NAME	RUSSELL,, CONNIE S
STREET ADDRESS	1806 ALAQUA LAKES BLVD
CITY-ST-ZIP	LONGWOOD, FL 32779

U00000838368
03/05/08-80028-007 150.00

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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 all other like empowered.

SIGNATURE Connie S. Russell   2/20/08 (407) 862-0035

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #