

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H08535

FILED
Jan 26, 2007
Secretary of State

Entity Name: THE RICKMAN PARTNERSHIP, INCORPORATED

Current Principal Place of Business:

4328 N.W. 29TH TERRACE
% WILLIAM C. DAVELL, ESQ.
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

4328 N.W. 29TH TERRACE
% WILLIAM C. DAVELL, ESQ.
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-2418856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVELL, WILLIAM C., ESQ.
1 FINANCIAL PLAZA
NATIONS BANCK STE 2602
FORT LAUDERDALE, FL 33394 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: RICKMAN, PHILIP E.,
Address: 4328 NW 29 TERR
City-St-Zip: GAINESVILLE, FL

Title: VSD () Delete
Name: RICKMAN, LINDA J.,
Address: 4328 NW 29 TERR
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: PHILIP E. RICKMAN

PRES

01/26/2007

Electronic Signature of Signing Officer or Director

Date