


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008 08:00 A
Secretary of State

DOCUMENT # H51577
 1. Entity Name
DANNY P. RINGDAHL ENTERPRISES, INC.



Principal Place of Business Mailing Address
750 N. ATLANTIC AVE., STE 1209 **750 N. ATLANTIC AVE., STE 1209**
COCOA BEACH, FL 32931 US **COCOA BEACH, FL 32931 US**

DO NOT WRITE IN THIS SPACE



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-2525934 Not Applicable

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

6. Name and Address of Current Registered Agent
RINGDAHL, DANNY P
750 N. ATLANTIC AVE., STE 1209
COCOA BEACH, FL 32931

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$180.00
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	P
NAME	RINGDAHL, DANNY P
STREET ADDRESS	750 N. ATLANTIC AVE., STE 1209
CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	V
NAME	BLANKENSHIP, DENNIE
STREET ADDRESS	1114 WESTVIEW DRIVE
CITY-ST-ZIP	COCOA, FL 32927
TITLE	ST
NAME	RINGDAHL, JANET
STREET ADDRESS	750 N. ATLANTIC AVE. STE. 1209
CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 01/16/08-80072-012 150.00

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: _____ **1-11-08** **321-783-1373**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #