

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H63132

Entity Name: R. P. O., INC.

FILED  
Apr 12, 2007  
Secretary of State

## Current Principal Place of Business:

4828 CHAPPERAL STREET  
CRESTVIEW, FL 32539 US

## New Principal Place of Business:

## Current Mailing Address:

4828 CHAPPERAL STREET  
CRESTVIEW, FL 32539 US

## New Mailing Address:

FEI Number: 59-2168221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FYFE, DIANE, D  
4828 CHAPPERAL STREET  
CRESTVIEW, FL 32539 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: DP ( ) Delete  
Name: FYFE, DIANE D,  
Address: 4828 CHAPPERAL STREET  
City-St-Zip: CRESTVIEW, FL

Title: VP ( ) Delete  
Name: WILCOX, NANCY  
Address: 10740 NORTH EMENEL GROVE ROAD  
City-St-Zip: UMATILLA, FL 32784

Title: ST ( ) Delete  
Name: DUNN, JOANNE,  
Address: 1063 ROYAL TROON CT.  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: C ( ) Delete  
Name: DUNN, LEWIS,  
Address: 1063 ROYAL TROON CT.  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VP ( ) Delete  
Name: DUNN, CARLETON,  
Address: 463 N GEORGES HILL ROAD  
City-St-Zip: SOUTHURY, CT

Title: DM ( ) Delete  
Name: FYFE, RICHARD T  
Address: 4828 CHAPPERAL STREET  
City-St-Zip: CRESTVIEW, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: DUNN, JOANNE,  
Address: 1185 ROYAL BLVD  
City-St-Zip: PALM HARBOR, FL 34684

Title: C (X) Change ( ) Addition  
Name: DUNN, LEWIS,  
Address: 1185 ROYAL BLVD  
City-St-Zip: PALM HARBOR, FL 34684

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: DIANE D. FYFE

DP

04/12/2007

Electronic Signature of Signing Officer or Director

Date