

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00168

Entity Name: RAYSON & COMPANY, INC.

FILED  
May 02, 2008  
Secretary of State

**Current Principal Place of Business:**

1507 EAST MURIEL ST.  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

23949 READING ROAD  
HOWEY-IN-THE-HILLS, FL 34737

**New Mailing Address:**

FEI Number: 59-2737779

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MIMS, WILLIAM L JR.  
320 N MAGNOLIA AVE STE A-9  
ORLANDO, FL 32801 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: RAY, ROBERT L  
Address: 23949 READING ROAD  
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737

Title: VP ( ) Delete  
Name: RAY, BEVERLY C  
Address: 23949 READING ROAD  
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737

Title: SEC ( ) Delete  
Name: DAWSON, JAMES C  
Address: 414 FAIRLANE AVE  
City-St-Zip: ORLANDO, FL 32809

Title: TRES ( ) Delete  
Name: RAY, ROBERT L  
Address: 23949 READING RD  
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 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: ROBERT L. RAY

PSTD

05/02/2008

Electronic Signature of Signing Officer or Director

Date