2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K92609

1. Entity Name
RING'S MANUFACTURING, INC.

Principal Place of Business	Mailing Address
99 EAST DRIVE	99 EAST DRIVE
MELBOURNE, FL 32904 US	MELBOURNE, FL 32904 US

DO NOT WRITE IN THIS SPACE

01042007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2954519	Not Applicable

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

6. Name and Address of Current Registered Agent

RING, CARL
99 EAST DRIVE
MELBOURNE, FL 32904

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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, 2007 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	RING, CARL
STREET ADDRESS	720 KERRY DOWNS CIR
CITY-ST-ZIP	MELBOURNE, FL
TITLE	VPST
NAME	RING, SHIRLEY
STREET ADDRESS	720 KERRY DOWNS CIR
CITY-ST-ZIP	MELBOURNE, FL
TITLE	DVP
NAME	RINGENBERG, JOHN
STREET ADDRESS	1252 FOX RIDGE PLACE
CITY-ST-ZIP	MELBOURNE, FL 32940
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _Shirley Ring_   1-11-07

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