2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Feb 18, 2008 08:00 All Secretary of State DOCUMENT # P00000032502 1. Entity Name THE E. RITTER CORPORATION Principal Place of Business Mailing Address 1071 CANDLELIGHT BLVD PO BOX 157 SUITE F87 **BROOKSVILLE, FL 34605** BROOKSVILLE, FL 34601 02142008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3621441 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent RITTER, EDWARD E DO NOT WRITE 1071 CANDLELIGHT BLVD APT F87 IN THIS SPACE BROOKSVILLE, FL 34601 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000830065 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 02/26/08-80067-021 150.00 OFFICERS AND DIRECTORS 10. PD TITLE RITTER, EDWARD E NAME 1071 CANDLELIGHT BLVD APT F87 STREET ADDRESS CITY-ST-ZIP BROOKSVILLE, FL 34601 TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME

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 impowered 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 attachi

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP