

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033433

Entity Name: DUCH RYAN INC.

FILED  
Apr 28, 2007  
Secretary of State

## Current Principal Place of Business:

14393 SPRINGHILL DR.  
SPRING HILL, FL 34609

## New Principal Place of Business:

## Current Mailing Address:

14393 SPRINGHILL DR.  
SPRING HILL, FL 34609

## New Mailing Address:

FEI Number: 59-3642082

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FELCHLIN, HOWARD  
16314 MCGLAMERY ROAD  
ODESSA, FL 33556 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: D ( ) Delete  
Name: FELCHLIN, HOWARD  
Address: 14393 SPRING HILL DR.  
City-St-Zip: SPRING HILL, FL 34609

Title: VP ( ) Delete  
Name: AILEEN, FELCHLIN A VP  
Address: 525 CENTERWOOD DR.  
City-St-Zip: TARPON SPRINGS, FL 34688

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HOWARD FELCHLIN

PRES

04/28/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date