


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2007 8:00 am
Secretary of State

07-25-2007 90047 036 ***150.00

DOCUMENT # P00000050864 1. Entity Name R.T. ROMANS, INC.					
Principal Place of Business 20 OBERLIN ROAD VENICE, FL 34293			Mailing Address 20 OBERLIN ROAD VENICE, FL 34293		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
6. Name and Address of Current Registered Agent MYERS, BRENT J CPA 3333 CLARD RD SUITE 100 SARASOTA, FL 34231				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: <u><i>Richard T. Romans</i></u> DATE: <u>7-23-07</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROMANS, RICHARD T 20 OBERLIN ROAD VENICE, FL 34293	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOLL, PHIL 12 NORTH MCCALL ROAD SARASOTA, FL 34223	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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: <u><i>Richard T. Romans</i></u> DATE: <u>7-23-07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

40127103



07172007 Chg-P CR2E034 (12/06)

4. FEI Number **65-1010317** Applied For ☐ Not Applicable ☐

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

ATTACHMENT
40127103
#P00000050864
R. T. ROMANS, INC.
20 Oberlin Road
Venice, Florida 34293

July 17, 2007

DIVISION OF CORPORATIONS
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Annual Uniform Business Report, 2007
F.E.I.N. 65-1010317

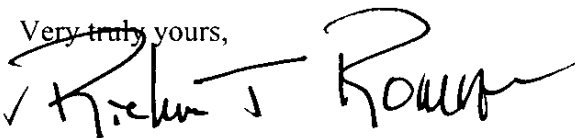
Dear Sir/Madam:

Our report was not filed in a timely manner due to never receiving notice from the State regarding the 2007 Annual Uniform Business Report. Enclosed please find our check in the amount of \$150.00 to cover the original filing fee along with our report.

Please notify us of your response to this letter in writing to the above address.

Thank you for your consideration and assistance in this matter.

Very truly yours,

✓  Richard T. Romans

Richard T. Romans
Enclosures