

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000034890



Entity Name
RIETH & RITCHIE, P.A.

Principal Place of Business
**101 EAST KENNEDY BOULEVARD
BANK OF AMERICA PLAZA #2430
TAMPA, FL 33602**

Mailing Address
**101 EAST KENNEDY BOULEVARD
BANK OF AMERICA PLAZA #2430
TAMPA, FL 33602**



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3709334	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RIETH, DAVID M
101 EAST KENNEDY BOULEVARD
BANK OF AMERICA PLAZA #2430
TAMPA, FL 33602**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

8. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

1110000396749
01/30/06-20024-001 150.00

OFFICERS AND DIRECTORS

NAME	DPST RIETH, DAVID M
ADDRESS	101 EAST KENNEDY BLVD. #2430
ST-ZIP	TAMPA, FL 33602
NAME	
ADDRESS	
ST-ZIP	
NAME	
ADDRESS	
ST-ZIP	
NAME	
ADDRESS	
ST-ZIP	
NAME	
ADDRESS	
ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 507, 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: David M. Rieth
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/19/06
Daytime Phone #