


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000054361 1. Entity Name RAYCO GROUP, INC.	
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Principal Place of Business 853 CHAMPIONS DR. NE PALM BAY, FL 32905	Mailing Address 853 CHAMPIONS DR. NE PALM BAY, FL 32905
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DO NOT WRITE IN THIS SPACE



04152004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3725660	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CATTERTON, A. VAN JR. 1990 WEST NEW HAVEN AVE., STE. 104 MELBOURNE, FL 32904

**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature typed or printed name of registered agent and if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when retaking)</small>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	DP ODOM, RAY D 853 CHAMPIONS DR. NE PALM BAY, FL 32905
TITLE NAME STREET ADDRESS CITY ST ZIP	ST ODOM, CAMILLE C 853 CHAMPION DRIVE NE PALM BAY, FL 32905
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04/19/04-80125-008 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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>Ray D Odom</u> <u>RAY D. ODOM</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4-15-04 321-228-0700 <small>DATE DAYTIME PHONE</small>
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