


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 28, 2006 08:00 AM
Secretary of State**

| | | |
|--|---|---|
| DOCUMENT # P01000063414 1. Entity Name R P W OF SARASOTA, INC. | |  |
| Principal Place of Business 2127 RINGLING ROAD SUITE 102 SARASOTA, FL 34237 | Mailing Address 2127 RINGLING ROAD SUITE 102 SARASOTA, FL 34237 | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent VENABLE, JOSEPH P 1400 4TH AVE. W. BRADENTON, FL 34205 | | 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 title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____ | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPS VENABLE, JOSEPH P 1400 4TH AVE. W. BRADENTON, FL 34205 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P RIVOLTA, PIERO 2127 RINGLING BLVD., SUITE 102 SARASOTA, FL 34237 | |
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| 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>Piero Rivolta</u> Piero Rivolta <u>4-16-06</u> 4-16-06 <u>941-955-0355</u> 941-955-0355 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | |



01042006 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 65-1117379 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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05/10/06-80076-025 150.00

**DO NOT WRITE
IN THIS SPACE**