## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000039260

Entity Name: RAMSDELL SCIENTIFIC, INC.

FILED Apr 30, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 519 LOWER CRAB ORCHARD ROAD 178 WATAUGA VALLE TRAIL SUGAR GROVE, NC 28679 BANNER ELK, NC 28604 **Current Mailing Address: New Mailing Address:** P.O. BOX 269 **BOONE, NC 28607** FEI Number: 04-3646491 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOMINICK, JULIAN K JR. 421 N. FERNCREEK AVE. ORLANDO, FL 32803 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition RAMSDELL, JEFFREY E Name: Name: PO BOX 269 Address: Address: City-St-Zip: **BOONE, NC 28607** City-St-Zip: Title: V/D Title: () Change () Addition () Delete RAMSDELL, CARLA S Name: Name: PO BOX 269 Address: Address: BOONE, NC 28607 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY E. RAMSDELL P/D 04/30/2006