

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90031 047 ***150.00

DOCUMENT # P02000049573			
1. Entity Name RAIDER 25, INC.			
Principal Place of Business 650 E SANFORD ST LAKE ALFRED, FL 33850		Mailing Address 650 E SANFORD ST LAKE ALFRED, FL 33850	
2. Principal Place of Business - No. P.O. Box # 4819 Lake Juliana Reserve		3. Mailing Address (Same)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Auburndale FL		City & State	
Zip 33823	Country	Zip	Country
6. Name and Address of Current Registered Agent BEVERAGE, JOHN 650 E SANFORD ST LAKE ALFRED, FL 33850		7. Name and Address of New Registered Agent Name: Sam Street Address (P.O. Box Number is Not Acceptable): 4819 Lake Juliana Res City: Auburndale FL Zip Code: 33823	
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: <i>John Beverage</i> DATE: 4/25/07			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D	NAME: BEVERAGE, JOHN	TITLE: Address change	NAME: Sam
STREET ADDRESS: 650 E SANFORD ST	CITY-ST-ZIP: LAKE ALFRED, FL 33850	STREET ADDRESS: 4819 Lake Juliana Res	CITY-ST-ZIP: Auburndale FL 33823
[Empty Officer/Directory Entry]		[Empty Officer/Directory Entry]	
[Empty Officer/Directory Entry]		[Empty Officer/Directory Entry]	
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[Empty Officer/Directory Entry]		[Empty Officer/Directory Entry]	
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: <i>John Beverage</i>		Date: 4/25/07	