## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 22, 2008 08:00 AM **DOCUMENT # P02000090834 Secretary of State** RYMAN CONSTRUCTION OF FLORIDA, INC. Principal Place of Business Mailing Address 36413 SR 54 36413 SR 54 ZEPHYRHILLS, FL 33541-2275 US ZEPHYRHILLS, FL 33541-2275 US 01082008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 52-2375816 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RYMAN, KEVIN L DO NOT WRITE 36413 S.R. 54 WEST ZEPHYRHILLS, FL 33541 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2008 Fee will be \$550,00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME RYMAN, KEVIN L STREET ADDRESS 36413 S.R. 54 WEST CITY-ST-7IP ZEPHYRHILLS, FL 33541 ST TITLE RYMAN, TAMMY L NAME STREET ADDRESS 36413 S.R. 54 WEST 01/23/08-80034-007 150.00 CITY-ST-ZIP ZEPHYRHILLS, FL 33541 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-73P IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 a

SIGNATURE:

CITY-ST-ZIP

YEED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR