


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000104133
 1. Entity Name
 RAYMOND & MARIA'S INC.



Principal Place of Business
 825 VIA BIANCA DRIVE
 DAVENPORT, FL 33896

Mailing Address
 825 VIA BIANCA DRIVE
 DAVENPORT, FL 33896



04112007 No Chg-P CR2E034 (11/05)

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4. FEI Number
 52-2379497

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAWRENCE, RAYMOND C
 825 VIA BIANCA DRIVE
 DAVENPORT, FL 33896

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	LAWRENCE, RAYMOND C
STREET ADDRESS	825 VIA BIANCA DRIVE
CITY-ST-ZIP	DAVENPORT, FL 33896
TITLE	VP
NAME	LAWRENCE, MARIA
STREET ADDRESS	825 VIA BIANCA DRIVE
CITY-ST-ZIP	DAVENPORT, FL 33896
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/25/07-80061-025-150.00

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: Raymond C. Lawrence April 11, 2007 863 670-7397
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #