

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90039 034 ***150.00

DOCUMENT # P03000128578

1. Entity Name

RICORP, INC.



Principal Place of Business

3043 PADDLE CREEK DR
JACKSONVILLE FL 32223
US

Mailing Address

3043 PADDLE CREEK DR
JACKSONVILLE FL 32223
US

2. Principal Place of Business - No P.O. Box #

3043 Paddle Creek Dr.

3. Mailing Address

P.O. Box 2302

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville FL

City & State

Cashiers, NC

Zip

32223

Country

USA

Zip

28717

Country

USA

4. FEI Number

41-2112076

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICCIARDELLI, DANIEL J
3043 PADDLE CREEK DR
JACKSONVILLE FL 32223

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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]

Signature, typed or printed name of registered agent and the filer, if applicable.

(NOTE: Registered Agent signature required when remediating)

Feb 24, 2008

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD	☐ Delete
NAME	RICCIARDELLI, DANIEL J PRES	
STREET ADDRESS	3045 PADDLE CREEK DR	
CITY-STATE-ZIP	JACKSONVILLE FL 32223	
TITLE	SD	☐ Delete
NAME	D. JOSEPH RICCIARDELLI	
STREET ADDRESS	147 MAGNOLIA STREET	
CITY-STATE-ZIP	ATLANTIC BEACH FL 32233	
TITLE	VD	☐ Delete
NAME	RICCIARDELLI, LINDA S	
STREET ADDRESS	3043 PADDLE CREEK DR	
CITY-STATE-ZIP	JACKSONVILLE FL 32223	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☒ Change ☐ Addition
NAME	Daniel J. Ricciardelli	
STREET ADDRESS	3043 Paddle Creek Dr	
CITY-STATE-ZIP	Jacksonville, FL 32223	
TITLE	Vice Pres/Sec.	☒ Change ☐ Addition
NAME	Linda S. Ricciardelli	
STREET ADDRESS	3043 Paddle Creek Dr.	
CITY-STATE-ZIP	Jacksonville, FL 32223	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 24, 2008

Date

828-553-

3001

Register Page #