2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128578

FILED Feb 23, 2009 Secretary of State

Entity Name: RICORP, INC.			
Current Principal Place of Business:	New Principal Place o	of Business:	
3043 PADDLE CREEK DR JACKSONVILLE, FL 32223 US			
Current Mailing Address:	New Mailing Address	:	
POST OFFICE BOX 2392 CASHIERS, NC 28717 US			
FEI Number: 41-2112076 FEI Number Applied For() F	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
RICCIARDELLI, DANIEL J 3043 PADDLE CREEK DR JACKSONVILLE, FL 32223 US			
The above named entity submits this statement for the purp in the State of Florida.	ose of changing its registered	office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: P () Delete Name: RICCIANDELLE, DANIEL J	Title: P (Name: RICCIARDEL	X) Change ()Addition LI. DANIEL J	

3045 PADDLE CREEK DR Address: 3045 PADDLE CREEK DR Address: City-St-Zip: JACKSONVILLE, FL 32223 US City-St-Zip: JACKSONVILLE, FL 32223 US

Title: **VPS** () Delete Title: (X) Change () Addition RICCIANEDLLA, LINDA S RICCIARDELLI, LINDA S Name: Name:

Address: 3043 PADDLE CRK DR Address: 3043 PADDLE CRK DR JACKSONVILLE, FL 32223 JACKSONVILLE, FL 32223 City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition VD

RICCIARDELLÍ, LINDA S Name: Name: Address: 3043 PADDLE CREEK DR Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL J. RICCIARDELLI Ρ 02/23/2009