## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P03000150118**

1. Entity Name

DONNA RIDLEY, PA



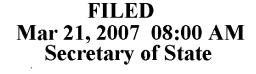
Principal Place of Business

Mailing Address

220 BELLEVIEW BLVD 710

5401 CENTRAL AVE. SAINT PETERSBURG, FL 33710

BELLEAIR, FL 33756





## DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired 

\$8.

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCATEE, CAROL 5401 CENTRAL AVENUE ST. PETERSBURG, FL 33710

## DO NOT WRITE 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)	DATE
		9. Election Campaign Finant Trust Fund Contribution.	sing \$5.00 May Be Added to Fees	
10. ·	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIDLEY, DONNA 220 BELLVIEW BLVD, UNIT 710 BELLEAIR, FL 33756	:	*	U00000674150 03/29/07-80060-001 150.0
TITLE NAME STREET ADORESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY: ST-ZIP				
TITLE NAME STREET ADDRESS CITY-S1-ZIP				
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.				