2007 FOR PROFIT CORPORATION

DOCUMENT # P04000003880

1. Entity Name

RDP & ASSOCIATES, INC



Principal Place of Business

6098 GRANDEUR ST ENGLEWOOD, FL 34224 Mailing Address

6098 GRANDEUR ST ENGLEWOOD, FL 34224

FILED May 02, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

03022007 No Clig-F	CRZI	CR2E034 (11/03)		
4. FEI Number		Applied For		
20-0625293		Not Applicable		
5. Certificate of Status Desired		\$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent

PATTON, RONALD D 6098 GRANDEUR ST ENGLEWOOD, FL 34224

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	f applicable (NOTE, Registered	f Agent signature	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000755557
10.	OFFICERS AND DIREC	TORS			<u> </u>
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P PATTON, RONALD D 6098 GRANDEUR ST ENGLEWOOD, FL 34224				
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP	•			IN '	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby o	certify that the information supplied with this fi	ling does not qualify for the exe	emptions co	ntained in Chapter 11	9, Florida Statutes. I further certify that the information of as if made under path; that I am an officer or director.

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

SIGN	ATU	RE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3667

Daytime Phone #