

# ANNUAL REPORT

**FILED**  
**Apr 17, 2008 8:00 am**  
**Secretary of State**

04-17-2008 90020 019 \*\*\*150.00

<b>DOCUMENT # P04000095393</b> 1. Entity Name <b>RUMMEL AND GRIMES INC.</b>					
Principal Place of Business <b>333 BAY STREET          JACKSONVILLE, FL 32202</b>			Mailing Address <b>38 WEST MONROE          JACKSONVILLE, FL 32202</b>		
2. Principal Place of Business - No P.O. Box # <b>333 E. BAY STREET</b> Suite, Apt. #, etc.			3. Mailing Address <b>333 E. BAY STREET</b> Suite, Apt. #, etc.		
City & State <b>JACKSONVILLE, FL</b> Zip <b>32202</b>		City & State <b>JACKSONVILLE, FL</b> Zip <b>32202</b>		4. FEI Number <b>20-1298966</b>	
Country <b>USA</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>RUMMEL, RYAN P          38 WEST MONROE          JACKSONVILLE, FL 32202</b>				7. Name and Address of New Registered Agent Name <b>Rummel, Ryan P.</b> Street Address (P.O. Box Number is Not Acceptable) <b>1607 KING STREET</b> City <b>Jacksonville, FL</b> Zip Code <b>32204</b>	
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 obligations of registered agent. SIGNATURE <u><i>Ryan Rummel</i></u> <b>Ryan Rummel</b> <u>4/14/08</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00          After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. <b>RUMMEL, RYAN P</b> <b>38 WEST MONROE</b> <b>JACKSONVILLE, FL 32202</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. <b>RUMMEL, RYAN P.</b> <b>1607 KING STREET</b> <b>JACKSONVILLE, FL 32204</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. <b>GRIMES, JASON</b> <b>38 WEST MONROE</b> <b>JACKSONVILLE, FL 32202</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. <b>GRIMES, JASON T.</b> <b>1505 MARGARET STREET</b> <b>JACKSONVILLE, FL 32204</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	(Empty row for additions/changes)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	(Empty row for additions/changes)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	(Empty row for additions/changes)		
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: <u><i>Jason Grimes</i></u> <b>JASON GRIMES</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>4/14/08</u> <small>Date</small>		