2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000098173

1. Entity Name

RHINO LAND AND MATERIALS, INC.



FILED Feb 08, 2007 08:00 Al Secretary of State

Principal Place of Business

1151 N. ORANGE AVE WINTER PARK, FL. 32789 Mailing Address

P.O. BOX 2545 WINTER PARK, FL 32790



02052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-1509367

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TATICH, PHILIP 1151 N. ORANGE AVENUE WINTER PARK, FL 32789

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	named entity submits this statement for the pitions of registered agent.	urpose of changing its registere	ed office or re	gistered agent, or bo	oth, in the State o	f Florida. I am far	miliar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	d Agent signature ri	equired when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees)000627.480 /07-80063	002_150.00
110. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD BANGLE, DOUG 1151 N. ORANGE AVE. WINTER PARK, FL. 32789	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD TATICH, PHILIP 1151 N. ORANGE AVE WINTER PARK, FL 32789						
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT	WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS S	SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

12. I hereby certify that the information supplied with this filling 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR

VP

2/5/07

(407) 629-443

Daytime Phone #