2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027050

Entity Name: RICHARD VANN INC

FILED May 01, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1125 CATHY TRIPP LANE
JACKSONVILLE, FL 32220

1129 CATHY TRIPP LANE
JACKSONVILLE, FL 32220

JACKSONVILLE, FL 32220

Current Mailing Address: New Mailing Address:

1125 CATHY TRIPP LANE
JACKSONVILLE, FL 32220

1129 CATHY TRIPP LANE
JACKSONVILLE, FL 32220

JACKSONVILLE, FL 32220

FEI Number: 20-2360415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VANN, RICHARD

1125 CATHY TRIPP LANE

JACKSONVILLE, FL 32220 US

VANN, RICHARD

1129 CATHY TRIPP LANE

JACKSONVILLE, FL 32220 US

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.

SIGNATURE: 05/01/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS () Delete Title: PS (X) Change () Addition

Name:VANN, RICHARDName:VANN, RICHARDAddress:1125 CATHY TRIPP LANEAddress:1129 CATHY TRIPP LANE

City-St-Zip: JACKSONVILLE, FL 32220 City-St-Zip: JACKSONVILLE, FL 32220

 Title:
 V
 () Delete
 Title:
 () Change () Addition

 Name:
 VANN, BRENDA
 Name:

 Address:
 1129 CATHY TRIPP LANE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32220
 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: BRENDA VANN V 05/01/2008