

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000067462

FILED
Aug 16, 2007
Secretary of State

Entity Name: RALOCO PROPERTIES CORP.

Current Principal Place of Business:

309 EAST BOOE STREET
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

PO BOX 1838
BUNNELL, FL 32110

New Mailing Address:

FEI Number: 16-1723865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
309 EAST BOOE STREET
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: TONACHIO, LOUIS
Address: 44 BARRISTER LANE
City-St-Zip: PALM COAST, FL 32137

Title: VTD () Delete
Name: TRAUERTS, RALPH
Address: 44 BARRISTER LANE
City-St-Zip: PALM COAST, FL 32137

Title: P () Delete
Name: TONACHIN, LOUIS
Address: 2 RIVILRE LN
City-St-Zip: PALM COAST, FL 32164

Title: VP () Delete
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

Title: S () Delete
Name: TONACHIN, LOUIS
Address: 2 RIVIERA LN
City-St-Zip: PALM COAST, FL 32164

Title: T () Delete
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

Title: VTD (X) Change () Addition
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

Title: P (X) Change () Addition
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TRAUERTS, RALPH
Address: 40 SEATON VALLEY PATH
City-St-Zip: PALM COAST, FL 32164

Title: () Change () Addition
Name:
Address:
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: RALPH TRAUERTS

PRES

08/16/2007

Electronic Signature of Signing Officer or Director

Date