

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081141

Entity Name: R.H. SAPP, INC.

FILED
Jul 25, 2007
Secretary of State

Current Principal Place of Business:

12078 NORTH CONFEDERATE DRIVE
GLEN ST. MARY, FL 32040 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1000
GLEN ST. MARY, FL 32040 US

New Mailing Address:

FEI Number: 20-2947157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNER, STEVEN W
1106 PARK AVENUE
ORANGE PARK, FL 32073 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SAPP, RONALD H
Address: P.O. BOX 1000
City-St-Zip: GLEN ST. MARY, FL 32040 US

Title: VP () Delete
Name: SAPP, MARY
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

Title: SEC () Delete
Name: SAPP, BRETT
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

Title: TREA () Delete
Name: SAPP, BRETT
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SAPP, MARY E
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

Title: SEC (X) Change () Addition
Name: SAPP, BRETT H
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

Title: TREA (X) Change () Addition
Name: SAPP, BRETT H
Address: P.O. BOX 1000
City-St-Zip: GLEN SAINT MARY, FL 32040 US

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: MARY E SAPP

VP

07/25/2007

Electronic Signature of Signing Officer or Director

_____ Date