

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 30, 2008 8:00 am**  
**Secretary of State**

07-30-2008 90029 019 \*\*\*150.00

<b>DOCUMENT # P06000138963</b>					
<b>1. Entity Name</b> PAMPLONA VENTURES, INC.					
<b>Principal Place of Business</b> 11934 FAIRWAY LAKES DR., SUITE 1 FT MYERS, FL 33913 US			<b>Mailing Address</b> 11934 FAIRWAY LAKES DR., SUITE 1 FT MYERS, FL 33913 US		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 20-5856179	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
RITSEMA, TROY 11934 FAIRWAY LAKES DR., SUITE 1 FT MYERS, FL 33913			Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<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 the obligations of registered agent.</b>					
SIGNATURE: <i>Troy Ritsema</i> <b>TROY RITSEMA, DIRECTOR</b> <span style="float: right;">7/28/08</span> <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</b> <b>Due by September 12, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITSEMA, TROY Q 13446 LITTLE GEM CIRCLE FT MYERS, FL 33913	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. TROY RITSEMA 11934 FAIRWAY LAKES DR., SUITE 1 FT. MYERS, FL 33913	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITSEMA, BARBEE K 13446 LITTLE GEM CIRCLE FT MYERS, FL 33913	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TROY RITSEMA 11934 FAIRWAY LAKES DR., SUITE 1 FT. MYERS, FL 33913	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>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.</b>					
SIGNATURE: <i>Troy Ritsema</i> <b>TROY RITSEMA, DIRECTOR</b> <span style="float: right;">7/28/08 239-225-0733</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					