2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000139752

1. Entity Name
RANDALL'S ASSOCIATES, INC.

Principal Place of Business	Mailing Address
2620 TAMIAMI TRL EAST NAPLES, FL 34112	2381 48TH AVENUE NE NAPLES, FL 34120

DO NOT WRITE IN THIS SPACE

02052008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-5842503	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RANDALL, THOMAS L
2381 48TH AVENUE NE
NAPLES, FL 34120

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000880309
04/15/08-80056-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RANDALL, THOMAS L
STREET ADDRESS	2381 48TH AVENUE NE
CITY-ST-ZIP	NAPLES, FL 34120
TITLE	VP
NAME	RANDALL, ELIZABETH
STREET ADDRESS	2381 48TH AVENUE NE
CITY-ST-ZIP	NAPLES, FL 34120
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE: _Thomas Randall_   4/1/08   734-7772232

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #