2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P08000000105

Entity Name: RAM SEALCOATING INC

Current Principal Place of Business:

19653 FLORANTINE CIRCLE
CLERMONT, FL 34715 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 121387
CLERMONT, FL 34712 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RONCHETTI, HELEN
19653 FLORANTINE CIRCLE
CLERMONT, FL 34715 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: D ( ) Delete
Name: RONCHETTI, HELEN
Address: PO BOX 121387
City-St-Zip: CLERMONT, FL 34712 US

Title: D ( ) Delete
Name: GIBSON, WHEELER D III
Address: PO BOX 121387
City-St-Zip: CLERMONT, FL 34712 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RONCHETTI, SIMON
Address: PO BOX 121387
City-St-Zip: CLERMONT, FL 34712 US

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: HELEN RONCHETTI RA 02/19/2009

Electronic Signature of Signing Officer or Director Date