2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000008722

Entity Name: RIVER FOREST, INC

FILED Jan 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7989 CAUSEWAY BLVD N 7989 CAUSEWAY BLVD N ST. PETERSBURG, FL 33743 ST. PETERSBURG, FL 33707 **Current Mailing Address: New Mailing Address:** P.O. BOX 47565 ST. PETERSBURG, FL 33743 FEI Number: 59-3153626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BALLOU, RAYMOND L BALLOU, RAYMOND L 7989 CAÚSEWAY BLVD N 7989 CAÚSEWAY BLVD N ST PETERSBURG, FL 33706 US US ST PETERSBURG, FL 33707 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: 01/29/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BALLOU, RAYMOND L. BALLOU, RAYMOND L. Name: Name: 7989 CAUSEWAY BLVD N 7989 CAUSEWAY BLVD N Address: Address: City-St-Zip: ST PETERSBURG, FL 33706 City-St-Zip: ST PETERSBURG, FL 33707 VΡ Title: Title: () Delete () Change () Addition Name: BALLOU, MICHAEL Name: P.O. BOX 47565 (N\A) Address: Address: ST. PETERSBURG, FL 33743 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition BALLOU, RAYMOND L Name: Name: P O BOX 47565 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33743 City-St-Zip: Title: () Delete Title: () Change () Addition BALLOU, MARGARET Name: Name: Address: P.O. BOX 47565 (N\A) Address: City-St-Zip: ST. PETERSBURG, FL 33743 City-St-Zip: Title: Title: () Delete () Change () Addition BALLOU PARKER, LANA Name: Name: P O BOX 47565 Address: Address: ST. PETERSBURG, FL 33743 City-St-Zip: 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: RAYMOND L. BALLOU P 01/29/2008