2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 8:00 am
Secretary of State
02-12-2007 90111 007 ***150.00

DOCUMENT # P93000020554

1. Entity Name
RIGHT-AS-RAIN, INC.

Principal Place of Business	Mailing Address
10473 WATERBIRD WAY BRADENTON FL 34209 US	10473 WATERBIRD WAY BRADENTON FL 34209 US

1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5508 MARINA DR.	PO BOX 1073.
Suite, Apt. #, etc. Suite D.	Suite, Apt. #, etc.
City & State Holmes Beach FL	City & State Holmes Beach FL
Zip 34217 Country	Zip 34218 Country MANATEE

4. FEI Number 65-0390572 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COMBS, FRANK P JR 10473 WATERBIRD WAY BRADENTON FL 34209	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY ST ZIP	DP COMBS, FRANK P JR 10473 WATERBIRD WAY BRADENTON FL 34209	☑ Delete P	TITLE DP. NAME COMBS, FRANK P. JR. STREET ADDRESS 5508 MARINA DR. SUITE D CITY ST ZIP Holmes Beach FL 34217		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DST COMBS, JANET E 10473 WATERBIRD WAY BRADENTON FL 34209	☑ Delete VP	TITLE DST NAME COMBS, FRANK P. JR STREET ADDRESS 5508 MARINA DR SUITE D. CITY ST ZIP Holmes Beach FL 34217		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete	TITLE DST NAME COMBS JANET E STREET ADDRESS 5508 MARINA DR SUITE D CITY ST ZIP Holmes Beach, FL 34217		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Frank P Combs 1/29/07 941-704-4282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #