## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P93000079257**

1. Entity Name
PHYLLIS RAY & ASSOCIATES, INC.



FILED May 04, 2007 08:00 A Secretary of State

Principal Place of Business

3150 22ND ST N ST PETERSBURG, FL 33713 Mailing Address

3150 22ND ST N ST PETERSBURG, FL 33713



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

05022007 No Chg-P CR2E034 (11/05)

4. FEt Number
59-3213972

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAY, PHYLLIS 3150 22ND ST N ST PETERSBURG, FL 33713

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the lons of registered agent.	purpose of changing its registe	ered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	If applicable (NOTE: Registe	ered Agent signature	required when reinstating)	DATE
FILE NOWILL FEE IS \$150.00  Due by September 14, 2007  9. Election Campaign Finar Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE D RAY, PHYLLIS 3150 22ND ST N ST PETERSBURG, FL 33713	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:		000000760880 05/25/07-80030-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					NOT WRITE THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP		•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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.					