

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001743

FILED
Mar 21, 2007
Secretary of State

Entity Name: RAIMONDA INVESTMENT GROUP, INCORPORATED

Current Principal Place of Business:

5911 SOUTHEAST HAMES ROAD
POST OFFICE BOX 2648
BELLEVIEW, FL 34421

New Principal Place of Business:

5911 SOUTHEAST HAMES ROAD
BELLEVIEW, FL 34420

Current Mailing Address:

5911 SOUTHEAST HAMES ROAD
POST OFFICE BOX 2648
BELLEVIEW, FL 34421

New Mailing Address:

FEI Number: 65-0637850 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAIMONDA, RONALD
3390 SE 56TH TERR
OCALA, FL 34471 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: PS () Delete
Name: RAIMONDA, RONALD P
Address: 3390 SE 56TH TERR
City-St-Zip: OCALA, FL

Title: VPT () Delete
Name: RAIMONDA, DEBRA L
Address: 3390 SE 56TH TERR
City-St-Zip: OCALA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: RAIMONDA, RONALD P
Address: 3390 SE 56TH TERR
City-St-Zip: OCALA, FL 34471

Title: VPT (X) Change () Addition
Name: RAIMONDA, DEBRA L
Address: 3390 SE 56TH TERR
City-St-Zip: OCALA, FL 34471

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA L. RAIMONDA

VPT

03/21/2007

Electronic Signature of Signing Officer or Director

_____ Date