## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000008643

Entity Name: ROSS INVESTMENT GROUP, INC

FILED Mar 09, 2009 Secretary of State

Entity Nar	me: ROSS INV	ESTMENT GROUP, INC.					
Name and Address of Current Registered Agent:  DELANEY, PHILIP A 3426 NW 43 ST STE B GAINESVILLE, FL 32606 US  The above named entity submits this statement for the purposin the State of Florida.			New Princ	New Principal Place of Business:			
		US					
Current M	lailing Address	::	New Maili	ng Address:			
		US					
FEI Number:	: 59-3361593	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of N	ew Registered Agent:		
DELANEY, PHILIP A 3426 NW 43 ST STE B GAINESVILLE, FL 32606 US			4041 NW 3 SUITE B	DELANEY, PHILIP A 4041 NW 37TH PL SUITE B GAINESVILLE, FL 32606 US			
		ubmits this statement for the pu	rpose of changing i	ts registered of	fice or registered agent, or both	١,	
SIGNATURE:				03/09/2009			
	Electroni	c Signature of Registered Ager	nt		Date	-	
Election Car	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I ROSS, LARRY J 324 NW 154 TH NEWBERRY, FL		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	TD () I ROSS, BONNIE 324 NW 154TH S NEWBERRY, FL	STREET	Title: Name: Address: City-St-Zip:	()	Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () I GANO, CHARLE: 8090 A1A S UNIT SAINT AUGUSTII	T 407	Title: Name: Address: City-St-Zip:	D (X) GANO, CHARLE 7566 A1A SOUT ST. AUGUSTINE	Н		
Title: Name: Address: City-St-Zip:	D () I SHERLIE H WES 101 SW 23 TERI GAINESVILLE, F	₹	Title: Name: Address: City-St-Zip:	( )	Change ()Addition		
Title: Name: Address:	D () I DELANEY, PHILI 3426 NW 43 ST,		Title: Name: Address:	D (X) DELANEY, PHIL 4041 NW 37TH			

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.

City-St-Zip: GAINESVILLE, FL 32606

SIGNATURE: BONNIE ROSS TD 03/09/2009

City-St-Zip: GAINESVILLE, FL 32606