

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000033571

1. Entity Name
C.D. RATEWATCH, INC.



Principal Place of Business
10463 VALENCIA RD.
SEMINOLE, FL 33772

Mailing Address
P.O. BOX 3933
SEMINOLE, FL 33775

DO NOT WRITE IN THIS SPACE



04302007 : No Chg-P : CR2E034 (11/05)

4. FID Number
59-3373520

Applies For
Not Applicable

5. Certificate or Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BALTRUNAS, ROBERT J
10463 VALENCIA ROAD
SEMINOLE, FL 33772

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

000000755227
05/22/07-80092-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	BALTRUNAS, ROBERT J
STREET ADDRESS	10463 VALENCIA RD.
CITY-ST-ZIP	SEMINOLE, FL 33772
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, 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 or other like empowered.

SIGNATURE:

Robert Baltrunas

4-30-07

(727) 398-3715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

LIBRARY FILING #