

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000090199

Entity Name: PAGIDIPATI FAMILY INVESTMENTS, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

1321 SW 42ND STREET
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

1321 SW 42ND STREET
OCALA, FL 34474

New Mailing Address:

FEI Number: 04-3754538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAGIDIPATI, DEVAIAH
1321 SW 42ND STREET
OCALA, FL 34474 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: P () Delete
Name: PAGIDIPATI, RUDRAMA D
Address: 2910 SW 7TH AVENUE
City-St-Zip: Ocala, FL 34474

Title: V () Delete
Name: PAGIDIPATI, DEVAIAH
Address: 2910 SW 7TH AVENUE
City-St-Zip: Ocala, FL 34474

Title: ST () Delete
Name: PAGIDIPATI, RAHULDEV R
Address: 2910 SW 7TH AVENUE
City-St-Zip: Ocala, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PAGIDIPATI, RUDRAMA D
Address: 1321 SW 42 STREET
City-St-Zip: Ocala, FL 34474

Title: V (X) Change () Addition
Name: PAGIDIPATI, DEVAIAH
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

Title: ST (X) Change () Addition
Name: PAGIDIPATI, RAHULDEV R
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

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.

SIGNATURE: DEVAIAH PAGIDIPATI MD

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date