

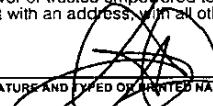


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2008 8:00 am**  
**Secretary of State**

02-19-2008 90026 029 \*\*\*150.00

<b>DOCUMENT # P96000094610</b> 1. Entity Name <b>RAM DEVELOPMENT COMPANY</b>					
Principal Place of Business <b>4801 PGA BLVD</b> <b>PALM BEACH GARDENS, FL 33418 US</b>			Mailing Address <b>4801 PGA BLVD</b> <b>PALM BEACH GARDENS, FL 33418 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>65-0711144</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>PETER D. CUMMINGS ASSOCIATION</b> <b>4801 PGA BLVD</b> <b>PALM BEACH GARDENS, FL 33418</b>			7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUMMINGS, PETER D 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Baye, Kenneth 817 West Peachtree Street, Suite 910 Atlanta, GA 30308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CUMMINGS, KEITH L 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Florian John E. 516 W. Peace Street Raleigh, NC 27603	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTV DEAN, DAVID A 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Celler, Karen D. 4801 PGA Blvd Palm Beach Gardens, FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GREANER, IVY G 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Grordo, Ernesto 4801 PGA Blvd Palm Beach Gardens, FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MANN, URI P 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Hammon, Michael A. 4801 PGA Blvd. Palm Beach Gardens, FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ENGLISH, BETTY 4801 PGA BLVD PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Hamon, Robert H. 4801 PGA Blvd. Palm Beach Gardens, FL 33418	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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.					
SIGNATURE: 			DAVID A. DEAN      5-15-08		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date      Daytime Phone #</small>		

ATTACHMENT

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT #P96000094610  
RAM DEVELOPMENT COMPANY

40027996

(CONTINUATION OF ITEMS 10 AND 11)

10.	OFFICERS & DIRECTORS	DELETE	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.	CHANGE	ADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Sorrin, Todd A. 4801 PGA Blvd. Palm Beach Gardens, FL 33418	X	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Skinner, Robert M. 4801 PGA Blvd. Palm Beach Gardens, FL 33418		X Addition