


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 A
Secretary of State

DOCUMENT # P97000022410 1. Entity Name RYBO 55, INC.	
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Principal Place of Business 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 32224-9667	Mailing Address 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 32224-9667
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01042008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3431450	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STOKES, E. CHESTER JR. 4315 PABLO OAKS CT SUITE 1 JACKSONVILLE, FL 32224	DO NOT WRITE IN THIS SPACE
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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.

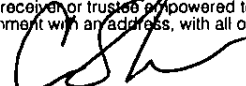
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN00000852364 03/26/08-80025-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP STOKES, E. CHESTER JR. 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 322249667
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BERGMANN, THOMAS C 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 322249667
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT FREDENHAGEN, SHARON W 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 322249667
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HOLM, MALLORY G 4315 PABLO OAKS COURT, STE. 1 JACKSONVILLE, FL 322249667
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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:  E. Chester Stokes, Jr. 3/18/08 904-482-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #