


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P97000053292</b> 1. Entity Name <b>PANTHER VIEW, INC.</b>	
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Principal Place of Business <b>16301 PHIL RITSON WAY WINTER GARDEN, FL 34787</b>	Mailing Address <b>16301 PHIL RITSON WAY WINTER GARDEN, FL 34787</b>
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02182007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3456298</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>RITSON, MICHELLE 16301 PHIL RITSON WAY WINTER GARDEN, FL 34787</b>
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**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 reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GLENN, GORDON S 1809 SYCAMORE PLACE MC KINNEY, TX 75070
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISAYAMA, CHIYO 10214 CHILTERN GARDEN DR ORLANDO, FL 32827
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOOFBURROW, JOHN 815 STANDISH AVENUE WESTFIELD, NJ 07090
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST PASSILLA, JAMES P 516 BUTLER STREET WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITSON, MICHELLE 16301 PHIL RITSON WAY WINTER GARDEN, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C RITSON, PHILIP V 16301 PHIL RITSON WAY WINTER GARDEN, FL 34787

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IN THIS SPACE**

U00000664141  
03/22/07-80033-004 158.75

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: Philip V Ritson **PHILIP V RITSON** 3-7-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone