

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000031675

1. Entity Name
KIRCHIN-RYAN, INC.



Principal Place of Business
2426 BEE RIDGE RD.
SUITE B
SARASOTA, FL 34239 US

Mailing Address
980 S BRINK AVE
SARASOTA, FL 34237



02242007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0913245

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RYAN, JOHN J III
980 S. BRINK AVE.
SARASOTA, FL 34237

**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 _____

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

000000756635
05/23/07-80037-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KIRCHIN, DIANE L
STREET ADDRESS	980 S BRINK AVE
CITY-ST-ZIP	SARASOTA, FL 34237
TITLE	D
NAME	RYAN, JOHN III
STREET ADDRESS	980 S BRINK AVE
CITY-ST-ZIP	SARASOTA, FL 39237
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

[Signature]

JOHN J. RYAN III

2/24/07

941-925-8480

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #