

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036745

FILED
Jan 12, 2007
Secretary of State

Entity Name: RAHILL & SONS DEVELOPMENT, INC.

Current Principal Place of Business:

932 VERSAILLES CIRCLE
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

932 VERSAILLES CIRCLE
MAITLAND, FL 32751

New Mailing Address:

141 MINNEHAHA ROAD
MAITLAND, FL 32751

FEI Number: 59-3586368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, N. DWAYNE JR.
GREENSPOON, MARDER, HIRSCHFELD ETAL
135 W. CENTRAL BLVD., STE. 1100
ORLANDO, FL 32801 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: DPS () Delete
Name: RAHILL, PAUL F
Address: 932 VERSAILLES CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: DVT () Delete
Name: RAHILL, MARCIA A
Address: 932 VERSAILLES CIRCLE
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARCIA RAHILL

DVT

01/12/2007

Electronic Signature of Signing Officer or Director

_____ Date