

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045364

Entity Name: RAVINELAND, INC.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

2809 OCEAN DR S
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

2809 OCEAN DR. SOUTH
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

2809 OCEAN DR S
JACKSONVILLE BEACH, FL 32250

FEI Number: 59-3575669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, GRADY H JR.
1543 S KINGSLEY AVE.
ORANGE PARK, FL 32073 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: SENHART, NECDET
Address: 2809 OCEAN DR SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: EDGINGTON, WILLIAM L
Address: POB 1153
City-St-Zip: ORANGE PARK, FL 320671153

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 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: NECDET SENHART

DPS

01/05/2009

Electronic Signature of Signing Officer or Director

_____ Date