

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057475

Entity Name: RAY CONTRACTING, INC.

FILED  
Jan 25, 2006  
Secretary of State

**Current Principal Place of Business:**

C/O JAMES W. GOODWIN  
201 N. FRANKLIN STREET, SUITE 2000  
TAMPA, FL 33602

**New Principal Place of Business:**

12091 145TH LANE NORTH  
LARGO, FL 33774

**Current Mailing Address:**

C/O JAMES W. GOODWIN  
201 N. FRANKLIN STREET, SUITE 2000  
TAMPA, FL 33602

**New Mailing Address:**

12091 145TH LANE NORTH  
LARGO, FL 33774

FEI Number: 59-3588343

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOODWIN, JAMES W  
201 N. FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602 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: DP ( ) Delete  
Name: RAY, CONSTANCE J  
Address: 12091 145TH LANE N  
City-St-Zip: LARGO, FL 33774

Title: ST ( ) Delete  
Name: RAY, JENNIFER J  
Address: 12091 145TH LANE N  
City-St-Zip: LARGO, FL 33774

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DVPT (X) Change ( ) Addition  
Name: RAY, ROBERT W  
Address: 12091 145TH LANE N  
City-St-Zip: LARGO, FL 33774

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: CONNIE RAY

P

01/25/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date