

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52007

Entity Name: RICHCO, INC.

FILED
Jul 10, 2004
Secretary of State

Current Principal Place of Business:

779 EAST MERRITT ISLEWAY
SUITE 397
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

779 EAST MERRITT ISLEWAY
SUITE 397
MERRITT ISLAND, FL 32952 US

New Mailing Address:

FEI Number: 59-3117208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, MAUREEN K
779 EAST MERRIT ISLEWAY
MERRITT ISLAND, FL 32952

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: D () Delete
Name: HAMILTON, D.T.,
Address: 4920 BANANA BOULEVARD
City-St-Zip: COCOA, FL 32929

Title: P () Delete
Name: WILLIAMS, MAUREEN K
Address: 779 EAST MERRITT ISLEWAY #397
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: WILLIAMS, Z. SCOTT MR
Address: 68 HOWELL ROAD
City-St-Zip: FRANKLIN, NC 28734

Title: DD () Delete
Name: WILLIAMS, DOUGLAS K
Address: 14322 FOXFORD WAY
City-St-Zip: HOUSTON, TX 77015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Section 119.07(3)(i), 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: MAUREEN K. WILLIAMS

PRES

07/10/2004

Electronic Signature of Signing Officer or Director

_____ Date