| I hereby 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 all other like empowered.                                                                                                                                     |  |
|                                                                                                                                                                                               |  |

TREASURER

SIGNATURE: CHRISTINA RYDER

I

Electronic Signature of Signing Officer/Director Detail

**Current Principal Place of Business:** 

**111 CLEVELAND AVENUE** CAPE CANAVERAL, FL 32920

#### **Current Mailing Address:**

P.O. BOX 237683 COCOA, FL 32923 US

## FEI Number: 27-2921869

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

RYDER, ROBERT A 2375 COX ROAD COCOA, FL 32926 US

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

### **Officer/Director Detail :**

City-State-Zip: ROCKLEDGE FL 32955

| Title        | Р                  | Title           | Т                  |
|--------------|--------------------|-----------------|--------------------|
| Name         | RYDER, ROBERT A    | Name            | RYDER, CHRISTINA A |
| Address      | 2375 COX ROAD      | Address         | 2375 COX ROAD      |
| City-State-Z | íp: COCOA FL 32926 | City-State-Zip: | COCOA FL 32926     |
|              | _                  |                 |                    |
| Title        | 0                  |                 |                    |
| Name         | KMAN, FRANK        |                 |                    |
| Address      | 899 JAMESTOWN DR   |                 |                    |
|              |                    |                 |                    |

#### 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000053815

Entity Name: BOB RYDER ELECTRIC & GENERATOR REPAIR, INC.

# Jan 19, 2018 Secretary of State CC0013012239

FILED

Certificate of Status Desired: Yes

01/19/2018

Date

Date