

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 287945

FILED
Jan 14, 2009
Secretary of State

Entity Name: SANCHEZ ROAD INVESTMENT COMPANY

Current Principal Place of Business:

121 NORTH COLLINS STREET
PLANT CITY, FL 33566

New Principal Place of Business:

121 NORTH COLLINS STREET
PLANT CITY, FL 33563 US

Current Mailing Address:

121 NORTH COLLINS STREET
PLANT CITY, FL 33566

New Mailing Address:

121 NORTH COLLINS STREET
PLANT CITY, FL 33563 US

FEI Number: 59-1092834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRINKLE, ROBERT S.
719 PINEDALE DRIVE
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

TRINKLE, ROBERT S.
719 PINEDALE DRIVE
PLANT CITY, FL 33563 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: ROBERT S. TRINKLE

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRINKLE, ANN H,
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 00000,

Title: PD () Delete
Name: TRINKLE, ROBERT S,
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 00000,

Title: ST () Delete
Name: TRINKLE, ANN H,
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TRINKLE, ANN H
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 33563 US

Title: PD (X) Change () Addition
Name: TRINKLE, ROBERT S
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 33563 US

Title: ST (X) Change () Addition
Name: TRINKLE, ANN H
Address: 121 NORTH COLLINS ST.
City-St-Zip: PLANT CITY, FL 33563 US

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: ROBERT S. TRINKLE

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date