

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 414636

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: ROBINSON MOTOR COMPANY

## Current Principal Place of Business:

1416 WEST BASE STREET  
MADISON, FL 32340

## New Principal Place of Business:

1314 WEST BASE STREET  
MADISON, FL 32340

## Current Mailing Address:

P O BOX 298  
MADISON, FL 32340

## New Mailing Address:

P O BOX 298  
MADISON, FL 32341

FEI Number: 59-1206061

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, LOWELL D  
1416 W BASE STREET  
MADISON, FL 32340 US

## Name and Address of New Registered Agent:

ROBINSON, LOWELL D  
1314 W BASE STREET  
MADISON, FL 32340 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:

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: ROBINSON, LOWELL D  
Address: HWY 53 NORTH  
City-St-Zip: MADISON, FL

Title: VPD ( ) Delete  
Name: ROBINSON, BRADFORD J  
Address: 2361 N. STATE ROAD 53  
City-St-Zip: MADISON, FL 32340

Title: VPD ( ) Delete  
Name: ROBINSON, BRENTON D  
Address: 124 NE KIRBY STREET  
City-St-Zip: MADISON, FL 32340

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: ROBINSON, LOWELL D  
Address: 2361 N STATE ROAD 53  
City-St-Zip: MADISON, FL 32340

Title: VPD (X) Change ( ) Addition  
Name: ROBINSON, BRENTON D  
Address: 2361 N. STATE ROAD 53  
City-St-Zip: MADISON, FL 32340

Title: VPD (X) Change ( ) Addition  
Name: ROBINSON, BRADFORD J  
Address: 124 NE KIRBY STREET  
City-St-Zip: MADISON, FL 32340

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: LOWELL D ROBINSON

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date