

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 526093

Entity Name: YANKEE REBEL, INC.

FILED
Jan 30, 2009
Secretary of State

Current Principal Place of Business:

202 ARMESTO RD
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

202 ARMESTO RD
HAVANA, FL 32333 US

New Mailing Address:

FEI Number: 59-1840826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARMESTO, MARK J
202 ARMESTO ROAD
HAVANA, FL 32333 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: PD () Delete
Name: ARMESTO, MARK J,
Address: 202 ARMESTO ROAD
City-St-Zip: HAVANA, FL 32333

Title: VD () Delete
Name: ARMESTO, MARK J.,J.R.,
Address: 1133 BLACKHAWK WAY
City-St-Zip: TALLAHASSEE, FL 32312

Title: S () Delete
Name: ARMESTO, DIANA
Address: 17505 KLAMATH FALLS DR
City-St-Zip: ROUND ROCK, TX 78681

Title: TD () Delete
Name: ARNESTI, LOU W
Address: 1133 BLACKHAWK WAY
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: ARMESTO, DIANA
Address: 55 WPPDLAND LOOP
City-St-Zip: ROUND ROCK, TX 78664

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

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: MARK J> ARMESTO

PD

01/30/2009

Electronic Signature of Signing Officer or Director

_____ Date