2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000509

Entity Name: RED-D-ARC, INC.

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
685 LEE IN AUSTELL,	IDUSTRIAL E GA 30168	BLVD.			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
685 LEE INDUSTRIAL BLVD. AUSTELL, GA 30168					
FEI Number:	88-0259460	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
1200 SOUT	ORATION SY TH PINE ISLA ON, FL 3332	AND ROAD			
The above in the State		submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financii	ng Trust Fund Contribution ().			
OFFICERS	AND DIREC	CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	IMIELINSKI, N	DUSTRIAL BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCLAUGHLIN	DR-CHESTER ROAD, SUITE 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CRAUN, TODI	DR-CHESTER ROAD, SUITE 100	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DARROCH, S	ERVICE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GATER, JANE 667 S SERVIO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BERTOLINO,	R-CHESLER RD SUITE 100	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STEVE DARROCH CFO 01/08/2009