2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004056

Entity Name: RAH OF FLORIDA, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4350 S. MONACO STREET SUITE 500				330 CROSSING BOULEVARD SUITE 200		
DENVER, CO 80237				ORANGE PARK, FL 32073		
Current Mailing Address:				New Mailing Address:		
4350 S. MONACO STREET SUITE 500, ATTN: CORPORATE LEGAL DENVER, CO 80237				330 CROSSING BOULEVARD SUITE 200 ORANGE PARK, FL 32073		
FEI Number:	: 84-1590389	FEI Number Applied For ()	FEI Nur	mber Not Appl	licable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:		Name and	Address of	New Registered Agent:
1200 SOU PLANTATI	ORATION SYS TH PINE ISLA ON, FL 33324	ND ROAD I US				
	named entity : e of Florida.	submits this statement for the p	urpose c	of changing i	ts registered	office or registered agent, or both,
SIGNATUF	RE:					
	Electror	nic Signature of Registered Age	nt			Date
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:		ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	VD () Delete REECE III, PARIS G 4350 S. MONACO STREET, SUITE 500 DENVER, CO 80237			Title: Name: Address: City-St-Zip:	VD (X) Change () Addition ANDERSON, CHRISTOPHER M 4350 S. MONACO STREET, SUITE 500 DENVER, CO 80237	
Title: Name: Address: City-St-Zip:	NORGART, AN	OOD PARK DRIVE, SUITE 180		Title: Name: Address: City-St-Zip:	JOHNS, MAR 330 CROSSII	(X) Change () Addition K W NG BOULEVARD, SUITE 200 RK, FL 32073
Title: Name: Address: City-St-Zip:	ROBERTS, MA	3 BLVD., SUITE 200		Title: Name: Address: City-St-Zip:	(() Change () Addition
Title: Name: Address: City-St-Zip:	S () FRETZ, JOSEF 4350 S. MONA DENVER, CO	PH H CO STREET, SUITE 500		Title: Name: Address: City-St-Zip:	(() Change () Addition
Title: Name: Address: City-St-Zip:	ZAKRZEWSKI,	3 BLVD., SUITE 200		Title: Name: Address: City-St-Zip:	(() Change () Addition
Title: Name: Address: City-St-Zip:	LILLY, MICHAE	BLVD., SUITE 200		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: JOSEPH H. FRETZ S 04/28/2009