## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06818

Entity Name: FLORIDA SEAL & RUBBER CO.

FILED Jan 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9201 RIVERCOVE DRIVE 1211 W. SYCAMORE ST. RIVERVIEW, FL 33569 US CHASE CITY, VA 23924 US

Current Mailing Address: New Mailing Address:

9201 RIVERCOVE DRIVE
RIVERVIEW, FL 33569 US

1211 W. SYCAMORE ST.
CHASE CITY, VA 23924 US

FEI Number: 59-2094020 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CHRISTOPHER, KASTEN A

220 S. FRANKLIN STREET

TAMPA, FL 33602 US

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 N. HIGHLAND AVENUE
TAMPA, FL 33602 US

TAMPA, FL 33602 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: A. CHRISTOPHER KASTEN, VP 01/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: PSD (X) Change ( ) Addition Name: YORE, JOHN W Name: YORE, JOHN W

Address: 9201 RIVERCOVE DR. Address: 1211 W. SYCAMORE ST.
City-St-Zip: RIVERVIEW, FL City-St-Zip: CHASE CITY, VA 23924

Title: D () Delete Title: D (X) Change () Addition

 Name:
 FECKER, HERBERT
 Name:
 FECKER, HERBERT

 Address:
 9201 RIVERCOVE DR.
 Address:
 1211 W. SYCAMORE ST.

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 CHASE CITY, VA 23924

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 MYCROFT, WALTER
 Name:
 MYCROFT, WALTER

 Address:
 9201 RIVERCOVE DR.
 Address:
 1211 W. SYCAMORE ST.

 City-St-Zip:
 RIVERVIEW, FL 33569 US
 City-St-Zip:
 CHASE CITY, VA 23924 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: JOHN W. YORE P 01/22/2009