2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H22858

City-St-Zip:

SUMMERFIELD, FL 34491

tity Name: ROBERT BAUER, INC

FILED Jan 28, 2009 Secretary of State

Entity Nai	me: ROBERT	BAUER, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	JS HWY 301 W, FL 34420	US			
Current Mailing Address:			New Mailing Address:		
PO BOX 2 BELLEVIE	758 W, FL 34421	US			
FEI Number:	: 59-2451404	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	J.S. HIGHWAY W, FL 34420	US	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () BAUER, KATHY 13150 US HWY BELLEVIEW, F	301	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () YOUNG, ALMA 12825 SE US H BELLEVIEW, F	WY 301	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V () GREEN, GERAI 16715 SE 16TH		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: KATHY BAUER PD 01/28/2009