

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H50276

FILED
May 14, 2009
Secretary of State

Entity Name: THE RAIN DRAIN COMPANY, INC.

Current Principal Place of Business:

281 AZALEA DRIVE
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

281 AZALEA DRIVE
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-2547934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WROBEL, ROBERT T
281 AZALEA DR
DESTIN, FL 32541 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: PEALE, J. R.
Address: 759 BAYOU DRIVE
City-St-Zip: DESTIN, FL

Title: D () Delete
Name: PEALE, FRANKIE J.
Address: 759 BAYOU DRIVE
City-St-Zip: DESTIN, FL

Title: PTSD () Delete
Name: WROBEL, ROBERT
Address: 320 SPRING LANE
City-St-Zip: DESTIN, FL 32541

Title: VPO (X) Delete
Name: MANDERY, JASON
Address: 206 COSTAKI CRT NW
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROBERT WROBEL

PTSD

05/14/2009

Electronic Signature of Signing Officer or Director

Date