# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 18, 2009**
**Secretary of State**

DOCUMENT# J28679

**Entity Name:** RIVER LANES OF TITUSVILLE, INC.

**Current Principal Place of Business:**

RIVER LANES
800 CHENEY HIGHWAY
TITUSVILLE, FL 32780 US

**New Principal Place of Business:**

**Current Mailing Address:**

800 CHENEY HWY.
TITUSVILLE, FL 32780

**New Mailing Address:**

RIVER LANES
800 CHENEY HIGHWAY
TITUSVILLE, FL 32780 US

**FEI Number: 59-2708679** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LEVENS, SHIRLEY
800 CHENEY HWY.
TITUSVILLE, FL 32780 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: LEVENS, SHIRLEY
Address: 5920 HUMMINGBIRD CT.
City-St-Zip: TITUSVILLE, FL 32780

Title: VP ( ) Delete
Name: HAM, CORRINE
Address: 4505 VANCOUVER
City-St-Zip: COCOA, FL 32927

Title: SEC ( ) Delete
Name: HARMON, CHARLENE
Address: 1366 ENCLAVE DR.
City-St-Zip: ROCKLEDGE, FL 32955

Title: T ( ) Delete
Name: HINTZ, CHAD
Address: 6230 EDISON ST.
City-St-Zip: PORT ST. JOHN, FL 32927

**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: CHARLENE HARMON SEC 02/18/2009

Electronic Signature of Signing Officer or Director Date