

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M43791

Entity Name: RUMEL HOLDING CO.

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

3201 BAYOU SOUND  
LONGBOAT KEY, FL 34228 US

**New Principal Place of Business:**

**Current Mailing Address:**

3201 BAYOU SOUND  
LONGBOAT KEY, FL 34228 US

**New Mailing Address:**

FEI Number: 59-2747474      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

VERNON, JANE D  
3201 BAYOU SOUND  
LONGBOAT KEY, FL 34228 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: V ( ) Delete  
Name: LUBELL, EARL  
Address: 77 LEED COURT EAST  
City-St-Zip: DANVILLE, CA 94526 US

Title: ST ( ) Delete  
Name: VERNON, JANE  
Address: 3201 BAYOU SOUND  
City-St-Zip: LONGBOAT KEY, FL 34228

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

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: JANE VERNON

ST

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date