2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001968

Entity Name: ROHOA, INC.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
8462 SW R ARCADIA, I	IVERSIDE DR FL 34269 US			
Current Mailing Address:		New Maili	New Mailing Address:	
8462 SW R ARCADIA, I	IVERSIDE DR FL 34269 US			
FEI Number: FEI Number Applied For ()		El Number Not Appli	icable (X) Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
233 TAYLO PUNTA GC	, EDWARD ESQ R STREET RDA, FL 33950 US named entity submits this statement for the purpo	ose of changing it	s registered office or registered agent, or both	
in the State		ose of changing in	a registered office of registered agent, or bottl,	
SIGNATUR	E:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete SIEGEL, ROBERT 8462 SW RIVERSIDE DR ARCADIA, FL 34269 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete BUTWELL, VICKIE 8414 SW RIVERSIDE DR ARCADIA, FL 34269 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete GAVRILOFF, JEAN 8657 SW RIVIERA DR ARCADIA, FL 34269	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GAVRILOFF, JEAN 8657 SW RIVIERA DR ARCADIA, FL 34269	
Title: Name: Address: City-St-Zip:	T () Delete SNYDER, DEBBY 9059 SW LIVERPOOL RD ARCADIA, FL 34269	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete MARKEY, MARTHA JO 237 N ROGERS ARCADIA, FL 34266	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SNYDER, CRAIG 9059 SW LIVERPOOL RD ARCADIA, FL 34266	Title: Name: Address: City-St-Zip:	() 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBBY SNYDER T 02/24/2009