2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002679

Entity Name: RPE&ASSOCIATES, INC.

FILED Aug 31, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

286 COASTAL HILL DR. INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address: New Mailing Address:

286 COASTAL HILL DR. INDIAN HARBOUR BEACH, FL 32937

FEI Number: 26-2206729 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

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

CHRISTIANSEN, MICHAEL E MASTRIANA & CHRISTANSEN PA 1500 NORTH FEDERAL HIGHWAY SUITE 200 FORT LAUDERDALE, FL 33304 US

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:

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Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition

 Title:
 DP () Delete
 Title:
 P (X) Change

 Name:
 EVANS, JR., RALPH E
 Name:
 EVANS, JR., RALPH E

 Address:
 286 COASTAL HILL DR.
 Address:
 286 COASTAL HILL DR.

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: DPST () Delete Title: VPST (X) Change () Addition Name: EVANS, JR., PATRICIA M Name: EVANS, PATRICIA M

Address: 286 COASTAL HILL DR. Address: 286 COASTAL HILL DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: BM () Delete Title: BM (X) Change () Addition

 Name:
 EVANS,JR., JONATHAN L.T.
 Name:
 EVANS, JONATHAN L.T.

 Address:
 4306 SW 21ST LANE
 Address:
 4306 SW 21ST LANE

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

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: PATRICIA M. EVANS VPST 08/31/2009