2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006848

Entity Names DEAD INTERNATIONAL

FILED Apr 29, 2009 Secretary of State

Entity Name: R.E.A.P. INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: 4410 E DIANA ST TAMPA, FL 33610 **Current Mailing Address: New Mailing Address:** 4410 E DIANA ST TAMPA, FL 33610 FEI Number: 80-0227078 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREEN, CALVIN J NUNN, STEPHEN A 4839 É. 99TH AVE. 4201 E 98TH AVE TAMPA, FL 33617 US US TAMPA, FL 33617 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: STEPHEN A. NUNN 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NUNN, STEPHEN A SR Name: Name: 4410 E DIANA ST Address: Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: Title: Title: () Delete () Change () Addition Name: NUNN, ARIAL L Name: Address: 4410 E DIANA ST Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: Title: () Delete Title: () Change () Addition LOTT, DONALD R JR Name: Name: 8005 TIERRA VERDE DR Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GREEN, ANGELA M Name: Address: 4201 E 98 AVE Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, CALVIN J SR Name: Name: 4201 E 98 AVE Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: () Delete Title: () Change () Addition GILBERT, FRED N L SR Name: Name: Address: 4015 N SEMINOLE AVE #7 Address: TAMPA, FL 33603 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN A. NUNN D 04/29/2009