

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004521

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** ROCK ON CLIMBING CORPORATION

**Current Principal Place of Business:**

3071 RIO PALMA N.  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

3071 RIO PALMA N.  
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number:** 27-1641721

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COBLE, KATHARINE  
3071 RIO PALMA N.  
INDIALANTIC, FL 32903 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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** DESAI, DIPTY  
**Address:** 221 LANSING ISLAND DRIVE  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937 US

**Title:** D  
**Name:** COBLE, KATHARINE  
**Address:** 3071 RIO PALMA N.  
**City-St-Zip:** INDIALANTIC, FL 32903 US

**Title:** D  
**Name:** ALCOCK, KARIN  
**Address:** 445 PINE TREE DR  
**City-St-Zip:** INDIALANTIC, FL 32903 US

**Title:** D  
**Name:** HOMBERGER, NANCY  
**Address:** 477 ST. LUCIA CT  
**City-St-Zip:** SATELLITE BEACH, FL 32937 US

**Title:** D  
**Name:** BRESSER, SHARON  
**Address:** 872 SANDERLING DRIVE  
**City-St-Zip:** INDIALANTIC, FL 32903

I hereby 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 all other like empowered.

**SIGNATURE:** KARIN ALCOCK

D

01/13/2011

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

\_\_\_\_\_  
Date