2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 AUG 25 PM 1:14

DOCUMENT # N29524

1. Entity Name
RHC MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4350 NEW RIVER HILLS PKWY VALRICO, FL 33594 US	9887 FOURTH STREET NORTH SUITE 301 ST. PETERSBURG, FL 33702

06172008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2973386 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, BRIAN K
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MASSIMEI, RICK 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mike Bardell 9887 Fourth str. N. St Petersburg, FL 33702 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MOONAN-WARTMAN, KATHY 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jim Rogers 9887 Fourth st N St Petersburg, FL 33702 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HONER, PAT 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ken Stoteler 9887 Fourth st. N St Petersburg, FL 33702 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GEDLING, LARRY 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800135280988 09/03/08--01005--009 **61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCGEE, PHIL 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEARSON, JEFF 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition B 8/25/08

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rick Massimei as Pres 7/1/08 813-662-0837
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #