

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004226

FILED
Apr 08, 2009
Secretary of State

Entity Name: ROLL'N REBELS, INC.

Current Principal Place of Business:

9254 SCEPTER AVENUE
BROOKSVILLE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

9254 SCEPTER AV
BROOKSVILLE, FL 34613 US

New Mailing Address:

9254 SCEPTER AVENUE
BROOKSVILLE, FL 34613 US

FEI Number: 59-1960008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLLETTI, SHEILA M
9254 SCEPTER AVE
BROOKSVILLE, FL 34613 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: P () Delete
Name: COLLETTI, FRANK
Address: 9254 SCEPTER AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: ST () Delete
Name: COLLETTI, SHEILA M
Address: 9254 SCEPTER AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: VP () Delete
Name: HANRAHAN, FRANCES
Address: 2825 CARDINAL TRAIL
City-St-Zip: LAKE WALES, FL 33898

Title: 2VP () Delete
Name: DUGGAN, JOHN
Address: 15345 DUGGAN DRIVE
City-St-Zip: DADE CITY, FL 33525

Title: TS () Delete
Name: COLLETTI, SHEILA M
Address: 9254 SCEPTER AVE
City-St-Zip: BROOKSVILLE, FL 34613

Title: AND () Delete
Name: RICARDO, JIMMIE
Address: 13063 COUNTY LINE RD
City-St-Zip: SPRINGHILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAGLER, PAUL
Address: 5448 MOSAIC DRIVE
City-St-Zip: HOLIDAY, FL 34690

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AND (X) Change () Addition
Name: RICARDO, JIMMIE
Address: 13063 COUNTY LINE RD
City-St-Zip: SPRING HILL, FL 34609

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: SM COLLETTI

ST

04/08/2009

Electronic Signature of Signing Officer or Director

Date