

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002963

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** REGIONS BEYOND INTERNATIONAL INC.

**Current Principal Place of Business:**

4047 DEVLIN CT  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 12549  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 59-3407780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSSI, PATRICK K  
4047 DEVLIN CT  
TALLAHASSEE, FL 32309 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: PD  
Name: MCDONALD, BRUCE D  
Address: 4047 DEVLIN CT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD  
Name: MCDONALD, BRUCE D III  
Address: 4047 DEVLIN CT  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD  
Name: RUSSI, PATRICK K  
Address: 2031 SUNNY DALE DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD  
Name: NODA, LAURENCE W  
Address: 3252 HEATHER HILL LN  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D  
Name: CABELL, THOMAS N  
Address: 9026 S DARLINGTON AV  
City-St-Zip: TULSA, OK 74137

Title: VD  
Name: MCDONALD, REBECCA  
Address: 4047 DEVLIN CT  
City-St-Zip: TALLAHASSEE, FL 32309

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: PATRICK K RUSSI

T

01/06/2010

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

\_\_\_\_\_  
Date