2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2009
Secretary of State

DOCUMENT# N99000003887

Entity Name: THE ROME FOUNDATION INTERNATIONAL, INC.

Current Principal Place of Business:

1109 MARBELLA PLAZA DRIVE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

1109 MARBELLA PLAZA DRIVE
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3598006 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PEAVYHOUSE, RUSSELL K
1001 EAST BAKER STREET
SUITE 201
PLANT CITY, FL 335633700 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	( ) Delete
Name:	DUNCAN, JOHN	
Address:	2 ROLLING HILLS CIRCLE	
City-St-Zip:	DENTON, TX 76205	
Title:	D	( ) Delete
Name:	CHADWELL, LARRY E	
Address:	468 CAROLINA WAY	
City-St-Zip:	HIGHLANDS, NC 28741	
Title:	O	( ) Delete
Name:	NORRIS, JEFF	
Address:	1109 MARBELLA PLAZA DRIVE	
City-St-Zip:	TAMPA, FL 33619	
Title:	D	( ) Delete
Name:	DOWDY, MILLER	
Address:	1101 MARBELLA PLAZA DRIVE	
City-St-Zip:	TAMPA, FL 33619	
Title:	D	( ) Delete
Name:	FULGHUM, DAVID	
Address:	9009 9 AVENUE NW	
City-St-Zip:	BRADENTON, FL 34209	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	( ) Change ( ) Addition
Name:	
Address:	
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: JEFF NORRIS O 06/29/2009

Electronic Signature of Signing Officer or Director — Date