2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006827

FILED Jan 10, 2009 Secretary of State

Entity Name: ZELLWOOD STATION RED CAPS. INC.

Littley Nai	me. ZELLVVOC	D STATION RED CAPS, INC	<i>,</i> .		
Current P	rincipal Place o	of Business:	New Principal Place	New Principal Place of Business:	
	DD STATION DD, FL 32798				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
BOX 782 ZELLWOC	DD, FL 32798				
FEI Number: 59-3609030 FEI Number Applied For () F		FEI Number Not Applicable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
4126 MYR	S, GEORGE TLE OAK CT DD, FL 32798	US			
	named entity sue of Florida.	ıbmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
	Electronic	Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C ()[HAECK, DENNIS 2549 FAIRBLUFF ZELLWOOD, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P ()[BURROWS, GEO 4126 MYRTLE O ZELLWOOD, FL	AK CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()[LAWTON, DICK 2729 LAKE GRA ZELLWOOD, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T ()[PIGGOTT, LEON 3733 N CITRUS (ZELLWOOD, FL	CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[BEEHLER, REX 2203 EVERGREI ZELLWOOD, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GEORGE BURROWS P 01/10/2009