

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000036387

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: ROBINSON STREET CORPORATION

**Current Principal Place of Business:**

201 TRISMEN TERRACE  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

**Current Mailing Address:**

201 TRISMEN TERRACE  
WINTER PARK, FL 32789 US

**New Mailing Address:**

FEI Number: 59-3639785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEFKOWITZ, IVAN M ESQ  
430 N MILLS AVE  
SUITE 4  
ORLANDO, FL 32803 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: GREENE, RANDALL B  
Address: 201 TRISMEN TERRACE  
City-St-Zip: WINTER PARK, FL 32789 US

Title: VSD ( ) Delete  
Name: LEFKOWITZ, IVAN M  
Address: 430 N MILLS AVE, SUITE 4  
City-St-Zip: ORLANDO, FL 32803 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDALL B GREENE

PTD

01/19/2009

Electronic Signature of Signing Officer or Director

Date