

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075189

Entity Name: ROD'N REEL ASSOCIATION, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

10826 LAKE HARRIS CIR
TAVARES, FL 32778

New Principal Place of Business:

31923 ELIZABETH LN
TAVARES, FL 32778

Current Mailing Address:

10826 LAKE HARRIS CIR
TAVARES, FL 32778

New Mailing Address:

31923 ELIZABETH LN
TAVARES, FL 32778

FEI Number: 59-2470818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELKE, BRIAN J P.A.
531 N BAY ST
EUSTIS, FL 32726 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: VP () Delete
Name: FRANDSEN, PAUL
Address: 1416 OAK TREE CT.
City-St-Zip: APOPKA, FL 32712

Title: P () Delete
Name: LAURENZO, TERRY
Address: 10550 150TH CT, N
City-St-Zip: JUPITER, FL 33478

Title: D () Delete
Name: MORLOCK, DON
Address: 294 KNOTTWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: S () Delete
Name: COMELLO, CAROL
Address: 10836 LAKE HARRIS CR
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: VIERLING, FRANK
Address: 10840 JACKIE LN.
City-St-Zip: TAVARES, FL 32778

Title: T () Delete
Name: BEAULIEU, JEAN
Address: 10826 LK HARRIS CIR
City-St-Zip: TAVARES, FL 32778

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:

Title: T (X) Change () Addition
Name: SUMPLE, ED
Address: 31923 ELIZABETH LN
City-St-Zip: TAVARES, FL 32778

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: ED SUMPLE

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date