

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000049338

Entity Name: GETRATESONLINE.COM, INC.

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

131 S COURTENAY PKWY
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

131 S COURTENAY PKWY
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-3724573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, MIKE
131 S. COURTENAY PKWY
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

LANE, LARRY
131 S. COURTENAY PKWY
MERRITT ISLAND, FL 32952 US

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: LARRY LANE, DIRECTOR

02/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: KENDALL, JANET K MS.
Address: 1435 SURREY LN.
City-St-Zip: GARNER, MI 48423 US

Title: D, S () Delete
Name: BROWN, MICHEAL MR.
Address: 107 ANCHORAGE AVE, UNIT 3
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, (X) Change () Addition
Name: KENDALL, JANET K MS.
Address: 1435 SURREY LN.
City-St-Zip: DAVISON, MI 48423 US

Title: D (X) Change () Addition
Name: LANE, LARRY A MR.
Address: 941 BROOKVIEW LANE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: O () Change (X) Addition
Name: BROWN, MJICHAEL A MR.
Address: 107 ANCHORAGE AVE
City-St-Zip: CAPE CANAVERAL, FL 32920 US

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: LARRY A. LANE

D

02/02/2009

Electronic Signature of Signing Officer or Director

Date