

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000052376

Entity Name: ELLISON RBM, INC.

**FILED**  
**Apr 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4009 LAKE KOSTA DRIVE  
LAKE WALES, FL 33853

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 2422  
LAKE WALES, FL 33859 24

**New Mailing Address:**

FEI Number: 01-0708125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELLISON, WOODROW (WOODY)  
4009 LAKE KOSTA DRIVE  
LAKE WALES, FL 338989366 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: PSTD  
Name: ELLISON, WOODY  
Address: 4009 LAKE KOSTA DRIVE  
City-St-Zip: LAKE WALES, FL 338989366

I hereby 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 all other like empowered.

SIGNATURE: WOODY ELLISON

PSTD

04/23/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date