2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109516

Address:

City-St-Zip:

230 EAST MARKET STREET

KINGSPORT, TN 37660

Entity Name: STATION OREEK PROPERTIES INC.

FILED Mar 20, 2009 Secretary of State

Littly Na	me. STATION	ICKLLK FROFI	ERTILO, INC.				
Current Principal Place of Business:				N	New Principal Place of Business:		
6841 AVOCADO DR INDIAN LAKES ESTATES, FL 33855				В	6841 AVOCADO DR BOX 7456 INDIAN LAKES ESTATES, FL 33855		
Current Mailing Address:				N	New Mailing Address:		
6841 AVOCADO DR BOX 7456 INDIAN LAKES ESTATES, FL 33855				В	6841 AVOCADO DR BOX 7456 INDIAN LAKES ESTATES, FL 33855		
FEI Number	: 05-0540707	FEI Number App	olied For()	FEI Numbe	er Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				N	Name and Address of New Registered Agent:		
RASNIC, JOHN B 6841 AVOCADO DRIVE INDIAN LAKES ESTATES, FL 33855 US				68 B(RASNIC, JOHN B 6841 AVOCADO DRIVE BOX7456 INDIAN LAKES ESTATES, FL 33855 US		
	named entity e e of Florida.	submits this state	ement for the pur	rpose of c	hanging its registere	ed office or registered agent, or both,	
SIGNATURE:						03/20/2009	
	Electror	nic Signature of F	Registered Agent	t		Date	
Election Car	mpaign Financin	g Trust Fund Contr	ibution ().				
OFFICERS AND DIRECTORS:				Α	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RASNIC, JOHN 6841 AVOCAD		55	Na Ad	rle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HEVENER, JEA 6841 AVOCAD		55	Na Ad	rle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name:	D () RASNIC, THOM) Delete IAS L			ile: ame:	() 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOHN B. RASNIC **PRES** 03/20/2009