

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000124944

FILED
Apr 29, 2009
Secretary of State

Entity Name: RED BEARDS COLLECTIBLES, INC.

Current Principal Place of Business:

2121 US1 S
UNIT 22
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

2160 US1 S
ST. AUGUSTINE, FL 32086

Current Mailing Address:

2121 US1 S UNIT 22
ST. AUGUSTINE, FL 32086

New Mailing Address:

2160 US1 S
ST. AUGUSTINE, FL 32086

FEI Number: 05-0541515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT R PRES.
2121 US1 S
UNIT 22
ST. AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

WILLIAMS, ROBERT R PRES.
2160 US1 S
ST. AUGUSTINE, FL 32086 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: ROBERT WILLIAMS

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, ROBERT R PRES
Address: 2121 US1 S UNIT 22
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP () Delete
Name: WILLIAMS, VICTOR R VPP
Address: 2121 US1 S UNIT 22
City-St-Zip: ST. AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, ROBERT R PRES
Address: 2160 US1 S
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VP (X) Change () Addition
Name: WILLIAMS, VICTOR R VPP
Address: 2160 US1 S
City-St-Zip: ST. AUGUSTINE, FL 32086

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: ROBERT WILLIAMS

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date