

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130671

FILED  
May 05, 2008  
Secretary of State

Entity Name: RL HOMES, INC.

## Current Principal Place of Business:

8209 SW 189 TERRACE  
MIAMI, FL 33157 US

## New Principal Place of Business:

19030 SW 82 COURT  
MIAMI, FL 33157 US

## Current Mailing Address:

P.O. BOX 570816  
MIAMI, FL 332570816 US

## New Mailing Address:

FEI Number: 27-0047310      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REARDON LEVINE MANAGEMENT, INC.  
8209 SW 189 TERRACE  
MIAMI, FL 33157 US

## Name and Address of New Registered Agent:

RL CORPORATE MANAGEMENT, INC.  
19030 SW 82 COURT  
MIAMI, FL 33157 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: DANIEL A LEVINE

05/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEVINE, DANIEL A  
Address: P.O. BOX 570816  
City-St-Zip: MIAMI, FL 332570816 US

Title: VP ( ) Delete  
Name: REARDON, ERIC T  
Address: 15964 SW 151 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: T (X) Delete  
Name: SUMMERS, JEANNIE  
Address: P.O. BOX 570816  
City-St-Zip: MIAMI, FL 332570816 US

Title: S (X) Delete  
Name: MARINELLI, MICHELLE  
Address: P.O. BOX 570816  
City-St-Zip: MIAMI, FL 332570816

## 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:

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: DANIEL A LEVINE

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date