2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0400000230

City-St-Zip:

ST. PETERSBURG, FL 33710

Entity Name: R. E. DEGRAFFENRIED, INC.

FILED Jun 16, 2009 Secretary of State

Littly Nai	ille. R. E. DE	GRAFI ENRIED, INC.			
Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
	I AVENUE NO RSBURG, FL				
Current Mailing Address:			New Mailing Address:		
	I AVENUE NO RSBURG, FL				
FEI Number	: 80-0090379	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
7602 15TH	FENRIED, ROI I AVENUE NO RSBURG, FL	RTH			
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DEGRAFFENF 7602 15TH AV) Delete IIED, ROBERT E ENUE NORTH URG, FL 33710	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DEGRAFFENF 7602 15TH AV) Delete KIED, YOLANDA R EUE NORTH JRG, FL 33710	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	,) Delete IED, YOLANDA R ENUE NORTH	Title: (Name: Address:	() 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.

City-St-Zip:

SIGNATURE: ROBERT E. DEGRAFFENRIED PRES 06/16/2009