

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 17, 2008  
Secretary of State

DOCUMENT# P04000153010

Entity Name: RD FLORIDA NO. 4, INC.

## Current Principal Place of Business:

401 CITY LINE AVENUE  
SUITE 710  
BALA CYNWYD, PA 19004

## New Principal Place of Business:

## Current Mailing Address:

401 CITY LINE AVENUE  
SUITE 710  
BALA CYNWYD, PA 19004

## New Mailing Address:

FEI Number: 20-1890766

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTHEWS & HAWKINS, P.A.  
4475 LEGENDARY DR  
ATTN: DANA C. MATTHEWS  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

MATTHEWS, DANA C ESQ.  
4475 LEGENDARY DR  
DESTIN, FL 32541 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: DANA C. MATTHEWS, ESQ.

03/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: DILSHEIMER, RICHARD H  
Address: 401 CITY LINE AVENUE, SUITE 710  
City-St-Zip: BALA CYNWYD, PA 19004

Title: VPS ( ) Delete  
Name: DILSHEIMER, ROBERT A  
Address: 401 CITY LINE AVENUE, SUITE 710  
City-St-Zip: BALA CYNWYD, PA 19004

Title: VPAS ( ) Delete  
Name: DILSHEIMER, THOMAS S  
Address: 401 CITY LINE AVENUE, SUITE 710  
City-St-Zip: BALA CYNWYD, PA 19004

Title: T ( ) Delete  
Name: JOHNSON, MARY  
Address: 401 CITY LINE AVENUE, SUITE 710  
City-St-Zip: BALA CYNWYD, PA 19004

## 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: RICHARD H. DILSHEIMER

DP

03/17/2008

Electronic Signature of Signing Officer or Director

Date