## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000003877

Entity Name: RD FLORIDA NO. 5, INC.

City-St-Zip:

BALA CYNWYD, PA 19004

FILED Mar 17, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 401 CITY AVE SUITE 710 BALA CYNWYD, PA 19004 **Current Mailing Address: New Mailing Address:** 401 CITY AVE SUITE 710 BALA CYNWYD, PA 19004 FEI Number: 20-2127061 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MATTHEWS, DANA C 4475 LEGENDARY DR DESTIN, FL 32541 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition DISHEIMER, RICHARD H DILSHEIMER, RICHARD H Name: Name: 401 CITY AVE. STE. 710 401 CITY AVE. STE. 710 Address: Address: City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip: BALA CYNWYD, PA 19004 ( ) Delete Title: **VPS** Title: () Change () Addition Name: DILSHEIMER, ROBERT A Name: 401 CITY AVE/ STE 710 Address: Address: BALA CYNWYD, PA 19004 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: **VPAS** () Change () Addition DILSHEIMER, THOMAS S Name: Name: 401 CITY AVE. STE. 710 Address: Address: City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, MAURY Name: Name: Address: 401 CITY AVE. STE 710 Address:

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: RICHARD H. DILSHEIMER DP 03/17/2008