2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080088

138 KENNEDY ROAD

EDDYVILLE, KY 42038

Address:

City-St-Zip:

Entity Name: RPC REALTY, INC.

FILED Mar 05, 2008 Secretary of State

Littly Na	ME. RECKLALIT, INC.			
Current P	rincipal Place of Business:	New Principal Place o	New Principal Place of Business:	
1835 HEALTH CARE DRIVE TRINITY, FL 34655		13634 EASY STREET HUDSON, FL 34669		
Current M	lailing Address:	New Mailing Address	New Mailing Address:	
1835 HEALTH CARE DRIVE TRINITY, FL 34655		13634 EASY STREET HUDSON, FL 34669		
FEI Number	: FEI Number Applied For () FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and	I Address of Current Registered Age	nt: Name and Address of	Name and Address of New Registered Agent:	
2312 U.S.	A, DAVID J HIGHWAY 19 FL 34691 US	CARDENAS, ROBIN 13634 EASY STREET HUDSON, FL 34669	US	
	e named entity submits this statement for e of Florida.	the purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE: ROBIN CARDENAS		03/05/2008	
	Electronic Signature of Registere	d Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete CARDENAS, ROBIN P 138 KENNEDY ROAD EDDYVILLE, KY 42038	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete CARDENAS, ROBIN P 138 KENNEDY ROAD EDDYVILLE, KY 42038	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete CARDENAS, ROBIN P 138 KENNEDY ROAD EDDYVILLE, KY 42038	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name [:]	T () Delete	Title: () 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.

Address:

City-St-Zip:

SIGNATURE: ROBIN P. CARDENAS PRES 03/05/2008