

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158467

Entity Name: RGP PRODUCTIONS, INC.

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

4005 WOODSIDE DRIVE
CORAL SPRINGS, FL 330651905

New Principal Place of Business:

Current Mailing Address:

4005 WOODSIDE DRIVE
CORAL SPRINGS, FL 330651905

New Mailing Address:

FEI Number: 51-0562871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICKERING, RITA G
4005 WOODSIDE DRIVE
CORAL SPRINGS, FL 330651905 US

Name and Address of New Registered Agent:

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 (X).

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: PICKERING, RITA G
Address: 4005 WOODSIDE DRIVE
City-St-Zip: CORAL SPRINGS, FL 330651905

Title: VP () Delete
Name: AIELLO, SHANNON L
Address: 7512 NW 40 STREET
City-St-Zip: CORAL SPRINGS, FL 330652002

Title: D () Delete
Name: PICKERING, MARK B
Address: 570 BOULEVARD PLACE NE #8
City-St-Zip: ATLANTA, GA 303082859

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PICKERING, MARK B
Address: 251 W. 92 STREET, #10C1
City-St-Zip: NEW YORK, NY 100257336

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: RITA G. PICKERING

PTSD

01/17/2009

Electronic Signature of Signing Officer or Director

Date