2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05750

BEST, RICHARD L

YOUNGSTOWN, OH

824 BEV ROAD

Name:

Address:

City-St-Zip:

FILED Mar 18, 2009 Secretary of State

Entity Name: R.L. BEST INTERNATIONAL, INC.					
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	LAKE MARY E , FL 32773	BLVD US			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1775 E. LA SANFORD	KE MARY BLVI , FL 32773	D. US			
FEI Number:	34-1464887	FEI Number Applied For ()	FEI Number Not Applicable (Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
BEST, TED A. 1775 EAST LAKE MARY BLVD SANFORD, FL 32773 US				BEST, TED A 1775 EAST LAKE MARY BLVD SANFORD, FL 32773 US	
The above in the State		ubmits this statement for the pu	rpose of changing its regist	tered office or registered agent, or both,	
SIGNATURE: TED A BEST				03/18/2009	
	Electroni	c Signature of Registered Agen	t	Date	
Election Cam	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () I KAVANAUGH, W 9931 CALLAWO CANFIELD, OH	ODS DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () I BEST, TED A., 1775 E. LAKE M. SANFORD, FL	Delete ARY BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () I BEST, MARK R., 8000 W MIDDLE SALEM, OH 444	TOWN ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	PTD ()I	Palata	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.

Name:

Address:

City-St-Zip:

SIGNATURE: TED A BEST VΡ 03/18/2009