2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000137647

Entity Name: ALLAN RANDOLPH, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

525 RIVIERA DRIVE 1776 CINNAMON CIRCLE

ALTAMONTE SPRINGS, FL 32701 US CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

525 RIVIERA DRIVE 1776 CINNAMON CIRCLE

ALTAMONTE SPRINGS, FL 32701 US CASSELBERRY, FL 32707 US

FEI Number: 84-1718649 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:

SHIPLEY, RANDOLPH A JR. WOOD, ALLAN S

525 RIVIÉRA DRIVE 1776 CÍNNMON CIRCLE
ALTAMONTE SPINGS, FL FL US CASSELBERRY, FL 32707 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: ALLAN WOOD 04/01/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SHIPLEY, RANDOLPH A JR. Name: WOOD, ALLAN S

Address: 525 RIVIÉRA DRIVE Address: 1776 CÍNNMON CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: CASSELBERRY, FL 32707

Title: VS () Delete Title: VS (X) Change () Addition

 Name:
 WOOD, ALLAN
 Name:
 WOOD, ALLAN S

 Address:
 525 RIVIERA DRIVE
 Address:
 1776 CINNMON CIRCLE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701 US
 City-St-Zip:
 CASSELBERRY, FL 32707 US

Title: T () Delete Title: T (X) Change () Addition

Name:SHIPLEY, RANDOLPHName:WOOD, ALLAN SAddress:525 RIVIERA DRIVEAddress:1776 CINNMON CIRCLECity-St-Zip:ALTAMONTE SPRINGS, FL 32701 USCity-St-Zip:CASSELBERRY, FL 32707 US

Title: S () Delete Title: S () Change (X) Addition

 Name:
 Name:
 WOOD, SHAUN A

 Address:
 Address:
 1776 CINNMON CIRCLE

 City-St-Zip:
 City-St-Zip:
 CASSELBERRY, FL 32707

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: ALLAN WOOD P 04/01/2009