

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068279

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: ROTTEN APPLE ENTERTAINMENT, INC.

## Current Principal Place of Business:

1910 SEMINOLE BOULEVARD SOUTH  
ST. PETERSBURG, FL 33705 US

## New Principal Place of Business:

## Current Mailing Address:

1910 SEMINOLE BOULEVARD SOUTH  
ST. PETERSBURG, FL 33705 US

## New Mailing Address:

FEI Number: 26-0334122      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

STINGLEY, COREY R  
1910 SEMINOLE BLVD S  
ST. PETERSBURG, FL 33705 US

## Name and Address of New Registered Agent:

ANDRINGA, ROBERT J  
4488 STAR STREET NORTH  
ST. PETERSBURG, FL 33709 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: ROBERT J. ANDRINGA, ESQUIRE

03/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LARRY, DAVID L  
Address: 1910 SEMINOLE BOULEVARD SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705 US

Title: S ( ) Delete  
Name: LARRY, DAVID L  
Address: 1910 SEMINOLE BOULEVARD SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705 US

Title: T ( ) Delete  
Name: LARRY, DAVID L  
Address: 1910 SEMINOLE BOULEVARD SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: VP (X) Delete  
Name: STINGLEY, COREY R  
Address: 1910 SEMINOLE BLVD  
City-St-Zip: ST PETERSBURG, FL 33705

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: DAVID L. LARRY

PRES

03/02/2009

Electronic Signature of Signing Officer or Director

Date