## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000016620

Entity Name: RLB SYSTEMS, INC

FILED Apr 30, 2009 Secretary of State

Littly Na	IIIe. RED STSTEWIS, INC.			
Current Principal Place of Business:		New Principa	New Principal Place of Business:	
1855 WEL	LS RD	538-3 PARK A	VE	
SUITE 3B	DADI( EL 00070 LIO	#3	N/ EL 00070 LIO	
ORANGE	PARK, FL 32073 US	ORANGE PAR	RK, FL 32073 US	
Current N	lailing Address:	New Mailing A	New Mailing Address:	
2166 PINELLA DR		1971 WEST LU	1971 WEST LUMSDEN ROAD	
	N, GA 30017 US	SUITE 354		
		BRANDON, FL	L 33511 US	
FEI Number	: 26-1968207 FEI Number Applied F	or ( ) FEI Number Not Applicab	le ( ) Certificate of Status Desired ( )	
Name and	I Address of Current Registered A	gent: Name and Ad	dress of New Registered Agent:	
JOHNSON, PEGGY A		JOHNSON, PE	JOHNSON, PEGGY A	
1855 WELLS RD		538-3 PARK A	538-3 PARK AVENUE	
SUITE 3A		#3		
ORANGE PARK, FL 32073 US		ORANGE PAR	ORANGE PARK, FL 32073 US	
	e named entity submits this statemen e of Florida.	t for the purpose of changing its re	egistered office or registered agent, or both,	
SIGNATU	RE:		04/30/2009	
	Electronic Signature of Regist	tered Agent	Date	
Election Ca	mpaign Financing Trust Fund Contributio	n ( ).		
OFFICERS AND DIRECTORS:		ADDITIONS/O	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PVST ( ) Delete	Title:	( ) Change ( ) Addition	
Name:	CHAPPELL, DAVID	Name:		
Address:	2166 PINELLA DR	Address:		
City-St-Zip:	GRAYSON, GA 30017 US	City-St-Zip:		
Title:	D ( ) Delete	Title:	( ) Change ( ) Addition	
Name:	CHAPPELL, DAVID	Name:		
Address:	2166 PINELLA DR	Address:		
City-St-Zip:	GRAYSON, GA 30017 US	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 CHAPPELL PVST 04/30/2009