2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# P08872

Entity Name: RODEM INC.

Current Principal Place of Business:

5095 CROOKSHANK RD
CINCINNATI, OH 45238

New Principal Place of Business:

Current Mailing Address:

5095 CROOKSHANK RD
CINCINNATI, OH 45238

New Mailing Address:

FEI Number: 61-0727096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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 ( ).

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: KERR, SUSAN,
Address: 1035 EVERSOLE
City-St-Zip: CINCINNATI, OH 45230

Title: V ( ) Delete
Name: DIENER, JEFFREY,
Address: 4351 HUTCHINSON GLEN
City-St-Zip: CINCINNATI, OH 45248

Title: P ( ) Delete
Name: DIENER, CHRISTOPHER,
Address: 8110 NORTH HOGAN ROAD
City-St-Zip: AURORA, IN 47001

Title: SD ( ) Delete
Name: FINKE, NANCY D
Address: 8618 STONEY BRIDGE
City-St-Zip: CINCINNATI, OH 45244

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: SD (X) Change ( ) Addition
Name: FINKE, NANCY D
Address: 26 WEBSTER POINT RD.
City-St-Zip: MADISON, CT 06443

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: SUSAN D KERR T 03/26/2009

Electronic Signature of Signing Officer or Director Date