

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000091838

Entity Name: RSI MANAGEMENT, INC.

FILED  
Apr 30, 2012  
Secretary of State

**Current Principal Place of Business:**

611 SE 1ST STREET  
WILLISTON, FL 32696 US

**New Principal Place of Business:**

**Current Mailing Address:**

611 SE 1ST STREET  
WILLISTON, FL 32696 US

**New Mailing Address:**

FEI Number: 45-3659251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBINSON, MARGUERITE  
611 SE 1ST STREET  
WILLISTON, FL 32696 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SISTRUNK, ROBERT  
Address: 6290 NE 184TH TERRACE  
City-St-Zip: WILLISTON, FL 32696 US

Title: VD  
Name: BIRD, DAVID  
Address: 20156 E PENNSYLVANIA AVE.  
City-St-Zip: DUNNELLON, FL 34432 US

Title: SD  
Name: ROBINSON, MARGUERITE  
Address: 611 SE 1ST STREET  
City-St-Zip: WILLISTON, FL 32696 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT SISTRUNK

PD

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date