

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023568

Entity Name: RBCA, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

2211 OKEECHOBEE ROAD
FORT PIERCE, FL 349506552 US

New Principal Place of Business:

Current Mailing Address:

ATTN: ACCOUNTING
2810 S. U.S. 1
FORT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0407667 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLACKWICH, ALAN S SR
4100-20TH ST
VERO BEACH, FL 32960 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: PD () Delete
Name: SMITH, VERNON D
Address: 2211 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34950

Title: STD () Delete
Name: BROWN, TIM E
Address: 2211 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34950

Title: VPD () Delete
Name: ROBBINS, CINDY M
Address: 2211 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, JOHN
Address: 2211 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34950

Title: T (X) Change () Addition
Name: ROSS, LEAELEANOR
Address: 2810 SOUTH FEDERAL HWY.
City-St-Zip: FORT PIERCE, FL 34982

Title: VPD (X) Change () Addition
Name: MCGRATH, LARRY
Address: 2211 OKEECHOBEE ROAD
City-St-Zip: FORT PIERCE, FL 34950

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: LEA ROSS

T

04/27/2009

Electronic Signature of Signing Officer or Director

Date