

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000085552

Entity Name: LARRY RABURN, INC.

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3 GALE KELLY CT  
WEAVERVILLE, NC 28787 US

**New Principal Place of Business:**

**Current Mailing Address:**

3 GALE KELLY CT  
WEAVERVILLE, NC 28787 US

**New Mailing Address:**

FEI Number: 59-3353181

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RABURN, LARRY  
903 LAKE LILY DR.  
248  
MAITLAND, FL 32751 US

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

RABURN, LARRY  
905 LAKE LILY DR.  
235  
MAITLAND, FL 32751 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/17/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: RABURN, LARRY  
Address: 3 GALE KELLY CT  
City-St-Zip: WEAVERVILLE, NC 28787

Title: ST  
Name: RABURN, MARY G  
Address: 3 GALE KELLY CT.  
City-St-Zip: WEAVERVILLE, NC 28787

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: LARRYWRABURN

PRES

03/17/2011

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

\_\_\_\_\_  
Date