## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000034496

Entity Name: SRBB, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9 RYANS WAY JACKSON, NJ 08527

Current Mailing Address: New Mailing Address:

C/O TRANSITION STRATEGIES CORPORATION 65 S, MAIN ST., SUITE B105 PENNINGTON, NJ 08534

FEI Number: 13-3887455 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SCHULMAN, RONCA, & BUCUVALAS, INC.

7431 COLLEGE PARKWAY

FORT MYERS, FL 33907 US

SCHULMAN, MARK A PH.D.
4192 BAY BEACH LN,
UNIT 865

ORT MYERS, FL 33907 US FORT MYERS BEACH, FL 33931 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: MARK A. SCHULMAN, Ph.D. 03/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SCHULMAN, MARK A SCHULMAN, MARK A PH.D. Name: Name: 7431 COLLEGE PARKWAY 4192 BAY BEACH LN, UNIT 865 Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: RONCA, ALBERT A Name: RONCA, ALBERT A

 Name:
 RONCA, ALBERT A
 Name:
 RONCA, ALBERT A

 Address:
 275 SEVENTH AVENUE 27TH FL
 Address:
 9 RYANS WAY

 City-St-Zip:
 NEW YORK, NY 10001
 City-St-Zip:
 JACKSON, NJ 08527

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 BOYLE, JOHN M
 Name:
 BOYLE, JOHN M PH.D.

 Address:
 8403 COLESVILLE RD, STE 820
 Address:
 4141 RED BANDANA WAY

 City-St-Zip:
 SILVER SPGS, MD 20910
 City-St-Zip:
 ELLICOTT CITY, MD 21042

Title: ( ) Delete Title: D ( ) Change (X) Addition Name: MICHAEL, BUCUVALAS J PH.D. Address: Address: 40 SOUTHGATE AVENUE City-St-Zip: HASTING-ON-HUDSON, NY 10706

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: ALBERT A. RONCA SECR 03/24/2009