2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P97000047985

Entity Name: RADBOUD PROPERTIES, INC.

Current Principal Place of Business:

1270 N. EGLIN PKY., STE. D
SHALIMAR, FL 32579

New Principal Place of Business:

1270 N. EGLIN PKY., STE. D
SHALIMAR, FL 325579

Current Mailing Address:

PO BOX 816
SHALIMAR, FL 32579 US

New Mailing Address:

PO BOX 816
SHALIMAR, FL 325579 US

FEI Number: 59-3450190 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANCHORS, MICHELLE ESQ
909 MAR WALK DR
SUITE 104
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

ANCHORS, MICHELLE ESQ
909 NW MAR WALT DR.,
STE 1022
FT WALTON BEACH, FL 32547 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: MICHELLE ANCHORS 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BEUKENKAMP, FELIX A
Address: 1270 N. EGLIN PKWY, SUITE D
City-St-Zip: SHALIMAR, FL 32579

Title: DV ( ) Delete
Name: TESSIER, PAUL R
Address: 1270 N. EGLIN PKWY, SUITE D
City-St-Zip: SHALIMAR, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: BEUKENKAMP, FELIX A
Address: 1270 N. EGLIN PKWY, SUITE D
City-St-Zip: SHALIMAR, FL 325579

Title: DV (X) Change ( ) Addition
Name: TESSIER, PAUL R
Address: 1270 N. EGLIN PKWY, SUITE D
City-St-Zip: SHALIMAR, FL 325579

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: FELIX A. BEUKENKAMP DP 04/24/2009
Electronic Signature of Signing Officer or Director Date