

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000036728

Entity Name: ROSE KNOWS, INC.

FILED  
Apr 03, 2009  
Secretary of State

## Current Principal Place of Business:

5698 SANDSTONE WAY  
JACKSONVILLE, FL 32258

## New Principal Place of Business:

3855 LIONHEART DR.  
JACKSONVILLE, FL 32216

## Current Mailing Address:

5698 SANDSTONE WAY  
JACKSONVILLE, FL 32258

## New Mailing Address:

3855 LIONHEART DR.  
JACKSONVILLE, FL 32216

FEI Number: 59-3508365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSE, ROBERT C P  
5698 SANDSTONE WAY  
JACKSONVILLE, FL 32258 US

## Name and Address of New Registered Agent:

ROSE, ROBERT C P  
3855 LIONHEART DR.  
JACKSONVILLE, FL 32216 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:

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROSE, ROBERT C P  
Address: 5698 SANDSTONE WAY  
City-St-Zip: JACKSONVILLE, FL 32258

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ROSE, ROBERT C P  
Address: 3855 LIONHEART DR.  
City-St-Zip: JACKSONVILLE, FL 32216

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: ROBERT C ROSE

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date