2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075142

Entity Name: R.D.K. MANAGEMENT, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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131-B BUSINESS CENTER DRIVE 131 BUSINESS CENTER DRIVE SUITE 11 SUITE B11

ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

PO BOX 1626 ORMOND BEACH, FL 32175

FEI Number: 59-3531784 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:

BLEDSOE, JAMES R 131-B BUŚINESS CENTER DRIVE

BLEDSOE, JAMES R 131 BUSINESS CENTER DRIVE STE B11 ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

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: 04/17/2009

> 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

BLEDSOE, DENEAH BLEDSOE, DENEAH Name: Name:

131-B BUSINESS CENTER DRIVE, SUITE 11 Address: 131 BUSINESS CENTER DRIVE, SUITE B11 Address:

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

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

Name: BLEDSOE, JAMES R Name: BLEDSOE, JAMES R

131-B BUSINESS CENTER DRIVE, SUITE 11 131 BUSINESS CENTER DRIVE, SUITE B11 Address: Address:

ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 City-St-Zip: City-St-Zip:

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

ALTHOUSE, KELLI B Name: ALTHOUSE, KELLI B Name:

131-B BUSINESS CENTER DRIVE, SUITE 11 Address: 131 BUSINESS CENTER DRIVE, SUITE B11 Address:

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

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: JAMES RONNIE BLEDSOE D 04/17/2009