

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000089218

Entity Name: ROBINSOFT CORPORATION

FILED  
Mar 13, 2009  
Secretary of State

## Current Principal Place of Business:

4405 MALL BLVD  
SUITE 318  
UNION CITY, GA 30291 US

## Current Mailing Address:

4405 MALL BLVD  
SUITE 318  
UNION CITY, GA 30291 US

## New Principal Place of Business:

500 WEST LANIER AVENUE  
SUITE 507  
FAYETTEVILLE, GA 30214 US

## New Mailing Address:

500 WEST LANIER AVENUE  
SUITE 507  
FAYETTEVILLE, GA 30214 US

FEI Number: 65-0875657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOLAN, JOHN  
875 - 102ND AVENUE NORTH  
NAPLES, FL 34108 US

## Name and Address of New Registered Agent:

TROYER, JEFF  
27311 PATRICK STREET  
BONITA SPRINGS, FL 34135 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: JEFF TROYER

03/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROBINSON, E M JR  
Address: 315 WYNGATE CIRCLE  
City-St-Zip: FAYETTEVILLE, GA 30215 US

Title: V ( ) Delete  
Name: ROBINSON, KATHY L  
Address: 315 WYNGATE CIRCLE  
City-St-Zip: FAYETTEVILLE, GA 30215 US

Title: STV (X) Delete  
Name: SELLARS, JANET B  
Address: 535 FIELDGREEN DRIVE  
City-St-Zip: JONESBORO, GA 30238 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STV (X) Change ( ) Addition  
Name: ROBINSON, KATHY L  
Address: 315 WYNGATE CIRCLE  
City-St-Zip: FAYETTEVILLE, GA 30215 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: E MONTGOMERY ROBINSON JR

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date