

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000026586

Entity Name: RDF ASSOCIATES, INC.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

29 C MIRACLE STRIP PKWY
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2613
FT. WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 59-3565876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWNER, ROBERT D
222 ECHO CIRCLE
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

FOWNER, ROBERT D
29-C MIRACLE STRIP PKY
FT. WALTON BEACH, FL 32548 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: ROBERT FOWNER

04/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FOWNER, ROBERT
Address: 222 EC HO CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32518

Title: S/T () Delete
Name: FOWNER, DEBORAH J
Address: 222 EC HO CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP () Delete
Name: WEBBER, AARON
Address: 150 LONG POINTE DR
City-St-Zip: MARY ESTHER, FL 32569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOWNER, ROBERT
Address: 222 ECHO CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32518

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

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: ROBERT FOWNER

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date