2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# S02266

Entity Name: JOHN ROBINSON II, INC.

Current Principal Place of Business:

1407 9TH ST.
SAINT CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

1407 9TH ST.
SAINT CLOUD, FL 34769

New Mailing Address:

FEI Number: 65-0220823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBINSON, JOHN II
2091 CAMELOT BLVD
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ROBINSON, JOHN II
Address: 2091 CAMELOT BLVD
City-St-Zip: SAINT CLOUD, FL 34772

Title: V ( ) Delete
Name: ROBINSON, CYNTHIA
Address: 2091 CAMELOT BLVD
City-St-Zip: SAINT CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN ROBINSON II DP 04/16/2009

Electronic Signature of Signing Officer or Director Date