

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S63316

Entity Name: RALPH'S 34408, INC.

FILED  
Mar 26, 2009  
Secretary of State

## Current Principal Place of Business:

34408 HWY 54 W  
ZEPHYRHILLS, FL 33543 US

## New Principal Place of Business:

## Current Mailing Address:

C/O D.E. ROBINSON  
7168 RUE DE PALISADES  
SARASOTA, FL 34238 US

## New Mailing Address:

C/O BRYAN HOSKINSON  
P.O. BOX 25363  
SARASOTA, FL 34277 US

FEI Number: 59-3077441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, DANIEL E  
7168 RUE DE PALISADES  
SARASOTA, FL 34238 US

## Name and Address of New Registered Agent:

HOSKINSON, BRYAN  
2307 INGRAM AVE  
SARASOTA, FL 34232 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: BRYAN HOSKINSON

03/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PST ( ) Delete  
Name: ROBINSON, DANIEL E.,  
Address: 7168 RUE DE PALISADES  
City-St-Zip: SARASOTA, FL 34238

Title: V ( ) Delete  
Name: HOSKINSON, BRIAN  
Address: PO BOX 25363  
City-St-Zip: SARASOTA, FL 34277

Title: V ( ) Delete  
Name: CULLEN, JEROME,  
Address: 124 EAST ST.  
City-St-Zip: FOXBORO, MA

Title: V ( ) Delete  
Name: WINDOM, ROBERT E.,  
Address: 5450 EAGLES POINT CIR.  
City-St-Zip: SARASOTA, FL 34231

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: ROBINSON, DANIEL  
Address: 7168 RUE DE PALISADES  
City-St-Zip: SARASOTA, FL 34238

Title: PST (X) Change ( ) Addition  
Name: HOSKINSON, BRYAN  
Address: PO BOX 25363  
City-St-Zip: SARASOTA, FL 34277

Title: V (X) Change ( ) Addition  
Name: CULLEN, JEROME,  
Address: 552 CENTRAL ST  
City-St-Zip: STOUGHTON, MA 02072

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: BRYAN HOSKINSON

PST

03/26/2009

Electronic Signature of Signing Officer or Director

Date