

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73321

Entity Name: RBH ENTERPRISES, INC.

FILED
Mar 13, 2009
Secretary of State

Current Principal Place of Business:

1605 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

New Principal Place of Business:

1603 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

Current Mailing Address:

1605 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

New Mailing Address:

1603 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

FEI Number: 65-0282233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELPHENSTINE, JOANN P
1901 TAMIAMI TRAIL
PUNTA GORDA, FL 33950 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: P () Delete
Name: HELPHENSTINE, JOANN P.
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: V () Delete
Name: HELPHENSTINE, ROBERT, B.
Address: 4470 RIVERSIDE DR.
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: LOMBARDO, DIANE,
Address: 16771 PRATO WAY
City-St-Zip: PUNTA GORDA, FL 34110

Title: ST () Delete
Name: LLEWELLYN, RICHARD H JR
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HELPHENSTINE, JO ANN P
Address: 1901 TAMIAMI TRAIL
City-St-Zip: PUNTA GORDA, FL 33950

Title: V (X) Change () Addition
Name: HELPHENSTINE, R. BRETT
Address: 4470 RIVERSIDE DR.
City-St-Zip: PUNTA GORDA, FL 33982

Title: D (X) Change () Addition
Name: LOMBARDO, DIANE H
Address: 16771 PRATO WAY
City-St-Zip: PUNTA GORDA, FL 34110

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: JO ANN P. HELPHENSTINE

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date