2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2007
Secretary of State

DOCUMENT# P01000065331

Entity Name: RAB OF GAINESVILLE, INC.

Current Principal Place of Business:

14423 NW US HWY 441 SO.
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1718
ALACHUA, FL 32616

New Mailing Address:

FEI Number: 59-3730243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, ROBERT E
5459 SE 57TH CT.
TRENTON, FL 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BROWN, ROBERT E
Address: 5459 SE 57TH CT.
City-St-Zip: TRENTON, FL 32693

Title: DVST ( ) Delete
Name: BROWN, ROBERT A
Address: 9029 NW 18TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

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: ROBERT E. BROWN DP 07/12/2007

Electronic Signature of Signing Officer or Director Date