

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 292922

(2)

1. Corporation Name

ROCKLEDGE GARDENS, INC.



Principal Place of Business

2153 SOUTH UNITED STATE HIGHWAY NO 1
ROCKLEDGE FL 32955

Mailing Address

2153 SOUTH UNITED STATE HIGHWAY NO 1
ROCKLEDGE FL 32955

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1965

4. FEI Number

59-1096580

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

WITTE, HARRY L, JR
2153 US HIGHWAY 1 S
ROCKLEDGE FL 32955

10. Name and Address of New Registered Agent

81 Name

Kevin L. Riley

82 Street Address (P.O. Box Number is Not Acceptable)

1393 Martin Rd.

83

Rockledge, FL

84 City

FL 85 Zip Code

32955

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

Kevin L. Riley

(NOTE: Registered Agent signature required when reinstating)

7/13/98

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	WITTE, HARRY L	
STREET ADDRESS	17 FERNWOOD DR	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WITTE, MARY B	
STREET ADDRESS	17 FERNWOOD DR	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	T	<input type="checkbox"/> DELETE
NAME	RILEY, KEVIN	
STREET ADDRESS	1393 MARTIN RD	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	S	<input type="checkbox"/> DELETE
NAME	RILEY, THERESA W	
STREET ADDRESS	1393 MARTIN RD	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Witte, Mary B
2.3 STREET ADDRESS	17 Fernwood Dr.
2.4 CITY-ST-ZIP	Rockledge, FL 32955
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Riley, Kevin
3.3 STREET ADDRESS	1393 Martin Rd.
3.4 CITY-ST-ZIP	Rockledge, FL 32955
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Riley, Theresa W.
4.3 STREET ADDRESS	1393 Martin Rd.
4.4 CITY-ST-ZIP	Rockledge, FL 32955
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Theresa W. Riley, 7/13/98 (Am) 636-7662

CR2E034 (5/98)