

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 503008

1. Entity Name  
RGR, INC.



**FILED**  
**Jan 30, 2004 08:00 AM**  
**Secretary of State**

Principal Place of Business

11300 4TH ST N  
STE 200  
ST. PETERSBURG, FL 33716-2940 US

Mailing Address

11300 4TH ST N  
STE 200  
ST PETERSBURG, FL 33716-2940 US



01072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1742249

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

CHADWICK, JAMES M  
11300 4TH ST N  
STE 200  
ST. PETERSBURG, FLORIDA E, FL 33716

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000021471  
01/30/04-80006-005 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	CHADWICK, JAMES M
STREET ADDRESS	11300 4TH ST N, STE 200
CITY - ST - ZIP	ST PETERSBURG, FL
TITLE	V
NAME	PENNALA, JUDY L
STREET ADDRESS	11300 4TH ST. N. STE. 200
CITY - ST - ZIP	ST. PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*James M. Chadwick*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James M. Chadwick, President

1/14/04

Date

727-576-0047

Daytime Phone #