

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-09-2006 90149 015 ***150.00

66006424

DOCUMENT # P05000066024 1. Entity Name RESOLVED DISPUTE RESOLUTION SERVICES, INC.					
Principal Place of Business 1407 EAST ROBINSON STREET ORLANDO, FL 32801			Mailing Address 1407 EAST ROBINSON STREET ORLANDO, FL 32801		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 30-0322996	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVE. SUITE 1000 (JGH) ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE : President, Secretary, Treasurer ☐ Delete NAME : H. David Luff STREET ADDRESS : 1407 E. Robinson Street CITY-ST-ZIP : Orlando, FL 32801			TITLE : ☐ Change ☒ Addition NAME : STREET ADDRESS : CITY-ST-ZIP :		
TITLE : ☐ Delete NAME : STREET ADDRESS : CITY-ST-ZIP :			TITLE : ☐ Change ☐ Addition NAME : STREET ADDRESS : CITY-ST-ZIP :		
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TITLE : ☐ Delete NAME : STREET ADDRESS : CITY-ST-ZIP :			TITLE : ☐ Change ☐ Addition NAME : STREET ADDRESS : CITY-ST-ZIP :		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: H. David Luff SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 3/7/06 Daytime Phone #: 4079268708		



ATTACHMENT
66006424

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2006

RESOLVED DISPUTE RESOLUTION SERVICES, INC.
1407 EAST ROBINSON STREET
ORLANDO, FL 32801

Corrected Return Attached.
Thank you,
David Luff

Subject: **RESOLVED DISPUTE RESOLUTION SERVICES, INC.**

Reference Number: **P05000066024**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

List the complete title, name, street address, city, state and zip code of each officer/director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/JE

ANNUAL REPORTS SECTION