I hereby 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 all other like empowered.

SIGNATURE: RICHARD P MADSEN

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

MADSEN, R. 221 ARLINGTON ROAD NORTH JACKSONVILLE, FL 32211 US

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:

Officer/Director Detail :			
Title	PDST	Title	VP
Name	MADSEN, R	Name	MADSEN, C
Address	221 ARLINGTON ROAD NORTH	Address	221 ARLINGTON ROAD NORTH
City-State-Zip:	JACKSONVILLE FL 32211	City-State-Zip:	JACKSONVILLE FL 32211

Certificate of Status Desired: No

04/23/2018

FILED Apr 23, 2018 Secretary of State CC0753911053

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# K20377

Entity Name: R.P.M. OF JACKSONVILLE, INC.

Current Principal Place of Business:

221 ARLINGTON ROAD NORTH JACKSONVILLE, FL 32211

Current Mailing Address:

221 ARLINGTON ROAD NORTH JACKSONVILLE, FL 32211 US

FEI Number: 59-2884587

PRESIDENT

Date

Date