## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # 323586** 

1. Entity Name RSS-CMHV, INC.

Principal Place of Business

3737 TIGEREYE COURT MULBERRY, FL 33860 Mailing Address

3737 TIGEREYE COURT MULBERRY, FL 33860

## FILED Aug 13, 2007 08:00 All Secretary of State



DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1233499

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

SMITH, EDGAR I JR. 3737 TIGEREYE COURT MULBERRY, FL 33860

SIGNATURE.

## DO NOT WRITE IN THIS SPACE

| 8 | Inelabove 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.   | •                              |
|   |  |                                |
|   |  |                                |

(NOTE: Repistered Agent signature required when reinstating)

FILE NOWIII FEE IS \$150.00

Due by September 14, 2007

Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

DATE

10. OFFICERS AND DIRECTORS TITLE NAME SMITH, ESTELLE 825 PINEWOOD AVE. STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33815 TITLE SMITH, EDGAR I. NAME STREET ADDRESS 3737 TIGEREYE COURT CITY-ST-ZIP MULBERRY, FL 33860 TITLE ASBURY, VORIA NAME STREET ADDRESS 1725 CHARANDEN AVENUE CITY-ST-ZIP LAKELAND, FL 33803 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000771944 08/13/07-80001-009 150.00

## DO NOT WRITE IN THIS SPACE

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:

TITLE NAME STREET ADDRESS

GIONATURE AND TYPED OR PROSTED NAME OF SIGNING OFFICER OR DISTORTS

8-9-07 (863)534-5204