

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

04 FEB -9 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 371705

1. Entity Name
RURAL DEVELOPMENT CORPORATION



Principal Place of Business

3612 JUNIPER RD
QUINCY, FL 32351

Mailing Address

P.O. BOX 70
GREENSBORO, FL 32330-0070

DO NOT WRITE IN THIS SPACE



01122004 No Chg-P CR2E034 (10/03) 04

4. FEI Number
59-1366102

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, GLENDA
338 HOLMES BLVD
FORT WALTON BEACH, FL 32548

**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 reinstating)

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

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	FLETCHER, CLARK
STREET ADDRESS	511 HOPKINS LANDING RD
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	SD
NAME	FENN, ROSALYN
STREET ADDRESS	1372 PROVIDENCE RD.
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	PD
NAME	HALL, GLENDA F.
STREET ADDRESS	338 HOLMES BLVD
CITY-ST-ZIP	FT. WALTON, FL
TITLE	D
NAME	BRIDGES, J
STREET ADDRESS	128 MATTHEW CLARK RD
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	V
NAME	FLETCHER, PATRICIA
STREET ADDRESS	3612 JUNIPER RD
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300028700013
02/13/04--01023--014 **150.00

**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 119.07(3)(i), 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 jike empowered.

SIGNATURE: *Patricia F. Vice*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia F. Vice

1/13/04

Date

850 442-6434

Daytime Phone #

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