

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2005 8:00 am**  
**Secretary of State**

04-15-2005 90109 023 \*\*\*150.00

DOCUMENT # 406221

1. Entity Name  
RESOURCES UNLIMITED, INC



Principal Place of Business  
1250 E HALLANDALE BEACH BLVD  
STE 300  
HALLANDALE, FL 33009

Mailing Address  
1250 E HALLANDALE BEACH BLVD  
STE 300  
HALLANDALE, FL 33009

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072005

Chg-P

CR2E034 (10/03)

4. FEI Number

13-3184413

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NESTOR, BRENDA  
1250 E HALLANDALE BEACH BLVD  
STE 300  
HALLANDALE, FL 33009

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

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE VPST ☐ Delete  
NAME LAUNER, BLANCHE S.  
STREET ADDRESS 1250 E HALLANDALE BEACH BLVD STE 300  
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE VCVF ☐ Delete  
NAME COLVIN, MELVIN R  
STREET ADDRESS 1250 E HALLANDALE BEACH BLVD STE 300  
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE CFAT ☐ Delete  
NAME MCGANN, EDWARD T  
STREET ADDRESS 1250 E HALLANDALE BEACH BLVD STE 300  
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE CEOP ☐ Delete  
NAME NESTOR, BRENDA  
STREET ADDRESS 1250 E HALLANDALE BEACH BLVD STE 300  
CITY-ST-ZIP HALLANDALE, FL 33009

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME Vice Chairman / EVP / AT / AS  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME Chairman / Pres / CEO / AT / AS  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/22/05 954-455-5953

Blanche Launer