

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **497638**

(7)

1. Corporation Name

R & R MAINTENANCE, INC.

05 MAY - 1 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**6827 PHILLIPS PARKWAY DR. S
JACKSONVILLE FL 32256**

Mailing Address

**10620 PHILLIPS HIGHWAY
JACKSONVILLE FL 32256
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1976

3a. Date of Last Report

06/20/1994

4. FCI Number

59-1660644

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐ **\$5.00 May Be
Added to Fees**

Trust Fund Contribution

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes.

☒ Yes ☐ No

2. Principal Place of Business

21

2b. Mailing Address

26

State Apt. # etc.

22

State Apt. # etc.

27

City & State

23

City & State

28

Zip

24

Separately

25

City

29

Country

30

9. Name and Address of Current Registered Agent

**REED, ROBERT I
6827 PHILLIPS PARKWAY, DRIVE SOUTH
JACKSONVILLE FL 32256**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent (If Not Applicable)

Signature of Registered Agent (If Not Applicable)

Signature of Registered Agent

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME

**PD
REED, ROBERT I, JR
214 ST. JOHNS RV PL LANE
SWITZERLAND, FL 32043**

1. NAME

1. STREET ADDRESS

1. CITY & STATE

1. ZIP

☐ Change ☐ Addition

NAME

**SD
REED, LINDA M
214 ST. JOHNS RV PL LANE
SWITZERLAND, FL 32043**

2. NAME

2. STREET ADDRESS

2. CITY & STATE

2. ZIP

☐ Change ☐ Addition

NAME

3. NAME

3. STREET ADDRESS

3. CITY & STATE

3. ZIP

☐ Change ☐ Addition

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4. NAME

4. STREET ADDRESS

4. CITY & STATE

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5. NAME

5. STREET ADDRESS

5. CITY & STATE

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6. CITY & STATE

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7. STREET ADDRESS

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8. NAME

8. STREET ADDRESS

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NAME

29. NAME

29. STREET ADDRESS

29. CITY & STATE

29. ZIP

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR