

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90025 036 ***150.00

DOCUMENT # 497638

1. Entity Name
R & R MAINTENANCE, INC.



Principal Place of Business Mailing Address
11700 PHILLIPS HIGHWAY 11700 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256 US

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01312007 Chg-P CR2E034 (12/06)

4. FEI Number 59-1660644 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REED, ROBERT I
11700 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256

7. Name and Address of New Registered Agent

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, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME REED, ROBERT I, JR
STREET ADDRESS 541 COUNTY ROAD 13 SOUTH
CITY-ST-ZIP SAINT AUGUSTINE, FL 32092

TITLE SD ☐ Delete
NAME REED, LINDA M
STREET ADDRESS 541 COUNTY ROAD 13 SOUTH
CITY-ST-ZIP SAINT AUGUSTINE, FL 32092

TITLE S ☒ Delete
NAME SELDON, PHILLIP
STREET ADDRESS 11700 PHILLIPS HIGHWAY
CITY-ST-ZIP JACKSONVILLE, FL 32256

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Vice-President ☐ Change ☒ Addition
NAME Robert Alexander Reed
STREET ADDRESS 2005 Rivers Own Road
CITY-ST-ZIP St Augustine, Fla 32092

TITLE Vice-President ☐ Change ☒ Addition
NAME Justin Thomas Reed
STREET ADDRESS 8105 River Pointe Court
CITY-ST-ZIP St Augustine, Fla 32092

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

TITLE ☐ Change ☐ Addition
NAME
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 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:

Robert I. Reed
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/07
Date

(904) 292-9100
Daytime Phone #