## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 653150

(3)

R.K. WOODRUFF, INC.

Principal Place of Business Mailing Address									1 308310 Billan Abied alian 13001 Alita Abit	AIBIL BIBLI BH	the firmer and the	)
801 S BROAD STREET 801 S BROAD STI BROOKSVILLE FL 34601 BROOKSVILLE FL												
									3. Date Incorporated or Qualified 01/23/1980		te of Last Re <b>6/1996</b>	eport
2. Principal Pl	lace of Busines							4. FEI Number 59-1960490			plied For	
Suite, Apt	#. etc	26 Suite	Suite, Apt. #, etc.							\$8.75	t Applicable	
22	,	27	<del></del>					5. Certificate of Status Desired		Fee Re		
City & State	9	City /	City & State					6. Election Campaign Financing	_	\$5.00	May Be	
23		28	\$					Trust Fund Contribution		Added t		
Zip	05	Country	Zip 29		30	ıntry			<ol> <li>This corporation has liability for Florida Statutes</li> </ol>	intangible t Yes		. 199.032,
24	g Name an	d Address of Curr		Agent	[30]	T			10. Name and Address of New Re			
WOO	DORUFF, KEN		<u> </u>			81	Name			<del></del>		
	S BROAD ST					82	Street	Addres	s (P.O. Box Number is Not Acceptab	ile)		
BRO	OKSVILLE FL		[			000017		a (r.o. box rearridge) is not recopial.	, ic j			
						83						
						84	City				85 Zip (	Code
						Ш				FL		
office or re	edistered agent	t or both, in the Sta	ite of Florida, Su	ch change was	: authorize	d by	the corr	corpor poration	ation submits this statement for the parties board of directors. I hereby accept	ourpose of of the appo	changing iti pintment as	s registered registered
agent. I ar	ni familiar with,	and accept the obl	igations of, Sect	ion 607.0505, F	Torida Sta	tutes	i		,	, ,		
SIGNATURE	Slavest to haved or n	ented name of registered a	agent and title it apple	able INC	TF Registers	d Ann	ot cionatiro	toouired	when reinstating)	DATE	<del></del>	
12.	bigilative, typica is	ND DIRECTORS				in dignatore	, requires	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12	
TITLE	PT			DELETE	1.1 T	ITLE					Change	Addition
NAME	WOODRUFF	•		1		1.2 NAME						
STREET ALIDRESS	9371 WALLI						1.3 STREET ADDRESS					
CITY-ST-7IP	BROOKSVIL	LE FL			1.4 C	ITY-S	T-ZIP					
TITLE	SV	CHAMBI		☐ DELETE	2.1 ₹	TLE					Change	Addition
NAME	WOODRUFF 9371 WALL	-					2.2 NAME					
STREET ADDRESS	BROOKSVIL						2.3 STREET ADDRESS					
COLY+ST+ZIP DITLE	V	LE FL		DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE		12			Change	Addition
NAME	WOODRUFF	F. RANDALL			3.1 V			Wo	dauff, landall 9 Village Dair 100/sville, Fl.	!	ess or origin	Addition
STREET ADDRESS	9371 WALL						ADDRESS	22	2 Village Dair	F		
CITY - ST - 7IP	BROOKSVIL	LE FL					T-ZIP	BA	coeksville Fl.	2460	, /	
TITLE				DELETE	4.1 T				7.	-	Change	Addition
NAME					4.21	IAME						
STREET ADDRESS					4.3 S	TREET	address					
CITY - S1 - ZIP					4.4 C	ITY - S	T-Z¦P					
TIPLE				DELETE	5.1 T	ITLE					Change	Addition
NAME					5.2 N							
STREET ADDRESS							ADDRESS					
CITY - ST - ZIP TITLE				DELETE	5.4 C	ITY - S	I - ZIP				Change	Addition
NAME				hard Other It	6.2 N					•	o willing	
STREET ADDRESS					4		address					
CITY - ST - ZIP						ITY-S						
14. I do hereb	by certify that th	se information supp	lied with this filin	g does not qua	lify for the	exe	mption s	tated in	Section 119.07(3)(i), Florida Statute	s I further	certify that	the
l am arī ol	Hicer or directo	this annual report or of the corporation flock 13 if changed,	or the receiver of	or trustee empo	wered to	accu exec	irate and ute this r	tnat m report a	y signature shall have the same lega is required by Chapter 607, Florida S	u errect as Statutes; an	π made und id that my n	per oath; that name

SIGNATURE: KEN Wooderff 1-2-97 352-296-3225