## 2004 FOR PROFIT CORFORATION ANNUAL REPORT

## **DOCUMENT # 680776**

1. Entity Name

R/C WORLD OF FLORIDA, INC.



Principal Place of Business

10900 INSIDE LOOP 296 HUNTRIDGE WAY ORLANDO, FL 32825 US Mailing Address

R/C WORLD OFF INC 10900 INSIDE LOOP ORLANDO, FL 32825 FILED Feb 12, 2004 8:00 am Secretary of State

02-12-2004 90034 040 \*\*\*150.00

**34014000** 

CR2E034 (10/03)



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 59-2011609 Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS, JOHN L., II 130 HILLCREST ST ORLANDO, FL 32801

## DO NOT WRITE IN THIS SPACE

No Chg-P

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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE PFOST, STAN NAME STREET ADDRESS 1413 HOWELL BRANCH RD CITY-ST-ZIP WINTER SPRINGS, FL TITLE LOCKWOOD, HARRY NAME STREET ADDRESS 10921 FAIR HAVEN WAY ORLANDO, FL 32825 CITY-ST-ZIP TITLE LANDOLEI, JOHN J 2541 TETON STONE RUN STREET ADDRESS DO NOT WRITE ORLANDO, FL 32828 CITY-ST-ZIP TITLE IN THIS SPACE CUTRONE, DIXIE NAME STREET ADDRESS 1325 N TROPICAL TRAIL CITY-ST-ZIP MERRITT ISLE, FL TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE 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:X

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime I