

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 09 PM 1:50

DOCUMENT # 857747 (0)

1. Corporation Name
R M F PROPERTIES, INC.

Principal Place of Business Mailing Address
921 CHATHAM LANE
SUITE 110
COLUMBUS OH 43221

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/15/1983 3a. Date of Last Report 02/01/1994

4. FEI Number 31-1066410 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 1601 Forum Place 26 1601 Forum Place
22 Suite 805 27 Suite 805
23 West Palm Beach FL 28 West Palm Beach FL
24 33401 25 USA 29 33401 30 USA

9. Name and Address of Current Registered Agent

MACKEY, WALTER J., JR.
772 LAGOON DRIVE
NORTH PALM BEACH FL 33408

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title of corporation)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVT	1.1 TITLE	☐ Change ☐ Addition
NAME	MACKEY, WALTER J., JR.	1.2 NAME	
STREET ADDRESS	772 LAGOON DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BCH FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	MACKEY, WALTER J., JR.	2.2 NAME	
STREET ADDRESS	772 LAGOON DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	N PALM BCH FL	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	☒ Change ☐ Addition
NAME	FAVOR, ANNE	3.2 NAME	
STREET ADDRESS	921 CHATHAM LN. #110	3.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBUS OH	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

S
Mrs. Lois Mackey
772 Lagoon Drive
North Palm Beach, FL 33408

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 appointed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attached notary public certificate.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter J. Mackey Jr.

1-16-95

407 684-8811