

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.  
AMOUNT DUE ON OR BEFORE 8/9/95: \$125 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
- SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JUN -9 AM 8:39

DOCUMENT # F34880 (7)

1. Corporation Name

RGE DISTRIBUTING COMPANY, INC.

Principal Place of Business

2321 STATE RD. 580  
CLEARWATER FL 34623

Mailing Address

2321 STATE RD. 580  
CLEARWATER FL 34623

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/14/1981

3a. Date of Last Report

06/14/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

PO Box 872

Suite, Apt. #, etc.

27

City & State

23

Zip

Country

City & State

28

Dunedin, FL

Zip

Country

24

25

29

30

34697

USA

4. FEI Number

59-2108541

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

6. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

EMSLIE, RICHARD G JR  
2321 STATE RD. 580, SUITE 5A  
DUNEDIN, FLORIDA  
CLEARWATER FL 34623

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

Richard G. Emslie Jr. President

(NOTE: Registered Agent signature required when registering)

Richard G. Emslie Jr.

6/1/95

12. OFFICERS AND DIRECTORS

|                 |                        |
|-----------------|------------------------|
| TITLE           | S                      |
| NAME            | EMSLIE, RICHARD G JR   |
| STREET ADDRESS  | 3909 WELLINGTON CIRCLE |
| CITY - ST - ZIP | PALM HARBOR FL         |
| TITLE           | D                      |
| NAME            | EMSLIE, RICHARD G      |
| STREET ADDRESS  | 2122 PADDOCK CIR       |
| CITY - ST - ZIP | DUNEDIN, FLORIDA 00000 |
| TITLE           | OPT                    |
| NAME            | EMSLIE, RICHARD G JR   |
| STREET ADDRESS  | 3909 WELLINGTON CIRCLE |
| CITY - ST - ZIP | PALM HARBOR FL         |
| TITLE           | DV                     |
| NAME            | EMSLIE, SUSAN          |
| STREET ADDRESS  | 3909 WELLINGTON CIRCLE |
| CITY - ST - ZIP | PALM HARBOR FL         |
| TITLE           |                        |
| NAME            |                        |
| STREET ADDRESS  |                        |
| CITY - ST - ZIP |                        |
| TITLE           |                        |
| NAME            |                        |
| STREET ADDRESS  |                        |
| CITY - ST - ZIP |                        |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                                                                   |
|---------------------|-------------------------------------------------------------------|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            |                                                                   |
| 1.3 STREET ADDRESS  |                                                                   |
| 1.4 CITY - ST - ZIP |                                                                   |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            |                                                                   |
| 2.3 STREET ADDRESS  |                                                                   |
| 2.4 CITY - ST - ZIP |                                                                   |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |                                                                   |
| 3.3 STREET ADDRESS  |                                                                   |
| 3.4 CITY - ST - ZIP |                                                                   |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |                                                                   |
| 4.3 STREET ADDRESS  |                                                                   |
| 4.4 CITY - ST - ZIP |                                                                   |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |                                                                   |
| 5.3 STREET ADDRESS  |                                                                   |
| 5.4 CITY - ST - ZIP |                                                                   |
| 6.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME            |                                                                   |
| 6.3 STREET ADDRESS  |                                                                   |
| 6.4 CITY - ST - ZIP |                                                                   |

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 119.07(3)(k), 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 empowered 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 attachment with an address.

SIGNATURE: Richard G. Emslie Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard G. Emslie Jr. President

Date

6/1/95

913-736-4201

CR2E034 (3/95)