

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F34880 (7)

1. Corporation Name

RGE DISTRIBUTING COMPANY, INC.



Principal Place of Business

2321 STATE RD. 580
CLEARWATER FL 34623

Mailing Address

P OBOX 872
DUNEDIN FL 34697
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

05/14/1981

3a. Date of Last Report

06/09/1995

4. FET 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

8. 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

Signature of person who is authorized to register agent and the corporation

Signature of Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	S	☐ DELETE
NAME	EMSLIE, RICHARD G JR	
STREET ADDRESS	3909 WELLINGTON CIRCLE	
CITY-STATE-ZIP	PALM HARBOR FL	
TITLE	D	☐ DELETE
NAME	EMSLIE, RICHARD G	
STREET ADDRESS	2122 PADDOCK CIR	
CITY-STATE-ZIP	DUNEDIN, FLORIDA 00000	
TITLE	DPT	☐ DELETE
NAME	EMSLIE, RICHARD G JR	
STREET ADDRESS	3909 WELLING CIRCLE	
CITY-STATE-ZIP	PALM HARBOR FL	
TITLE	DV	☒ DELETE
NAME	EMSLIE, SUSAN	
STREET ADDRESS	3909 WELLINGTON CIRCLE	
CITY-STATE-ZIP	PALM HARBOR FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	EMSLIE, RICHARD G JR
4.3 STREET ADDRESS	3909 WELLINGTON CIRCLE
4.4 CITY-STATE-ZIP	PALM HARBOR, FL 34685
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-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 or on an attached sheet with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96

813-736-4701

CR2E034 (12/95)