FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F47827** **(3)**

1. Corporation Name
RFV MANAGEMENT, INC.

Principal Place of Business	Mailing Address
1225 A1A HWY HILLSBORO BCH FL 33062-1412	1225 A1A HWY HILLSBORO BCH FL 33062-1412

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/07/1981**
3a. Date of Last Report: **05/17/1994**

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: **59-2126029** ☐ 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

O'BOYLE,JOHN
1225 HILLSBORO MILE
HILLSBORO BCH FL 33062

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: J T O'Boyle — JOHN T. OBOYLE — 4/11/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	11 TITLE	☐ Change ☐ Addition
NAME	HOEY, JOHN	12 NAME	P HOEY,JOHN
STREET ADDRESS	180 BLYTH CRESENT	13 STREET ADDRESS	
CITY-ST-ZIP	OAKVILLE,ONTARIO,CAN	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	WHITE, RON	22 NAME	
STREET ADDRESS	493 THE ESPLANADE	23 STREET ADDRESS	
CITY-ST-ZIP	OAKVILLE ON	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	MACKENZIE, ALEXANDER	32 NAME	S MACPHERSON,DONALD
STREET ADDRESS	4901 GULF SHORE BLVD N	33 STREET ADDRESS	253 Hunter St. W.
CITY-ST-ZIP	NAPLES FL	34 CITY-ST-ZIP	~~Peterborough, Ont., Canada, K9H2L4~~
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	MARSHALL, JOHN	42 NAME	
STREET ADDRESS	107 MAPLEWOOD DR	43 STREET ADDRESS	
CITY-ST-ZIP	BEAVER PA	44 CITY-ST-ZIP	
TITLE	P	51 TITLE	☐ Change ☐ Addition
NAME	CURTIS, HENRY	52 NAME	D Manning Case
STREET ADDRESS	17 EVERETT AVE.	53 STREET ADDRESS	25 Lake End Place
CITY-ST-ZIP	WINCHESTER MA	54 CITY-ST-ZIP	Mountain Lakes, N.J.,07046
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(i), 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 attached sheet, with an address.

SIGNATURE: X John T. Hoey — John Hoey — 4/11/95 — 305 427 86 0660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

6154442 CR