## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AMOUST 0, 18 AMOUNT DUE ON OR REFORE 4/4/46: \$224 (OF DISSOLVED, MINIMUM AMOUNT DUE TO REMETATE: \$2 BUM AMOUNT DUE TO REMETATE: \$2/5) FLORNDA DEPARTMENT OF STATE PROFIT CORPORATION Sandra B. Mortham SECRETARY OF STATE ANNUAL REPORT Societary of State 1995 DIVISION OF CORPORATIONS ANVISION OF CORPORATIONS DOCUMENT # F685 95 AUG -4 AM 10: 1.5 Corporation Name RK CUSTOM BUILDERS, INC. Principal Place of Business Mailing Address 10029 GROVE DRIVE 10028 GROVE DRIVE PORT RICHEY FL 34668 PORT RICHEY FL 34668 DO NOT WRITE IN THIS SPACE. 3. Date Incorporated or Qualified 3g, Date of Last Report 05/24/1994 02/24/1982 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2156241 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Country 8. This corporation has liability for interigible tax under s. 199.032, Žμ Country X Yes ☐ No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 REEDER, JACK 82 Street Address (P.O. Box Number is Not Acceptable) 10028 GROVE DR. 83 PT. RICHEY FL 34668 Zip Code 84 City 85 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, typod or printed name of registered agent and little if applicable INOTE: Recistered Agent sonature required when registrating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition 1 1 litte TITLE REEDER, JACK 12 NAME NAME 10028 GROVE DR. 1.3 STREET ADDRESS STREET ADDRESS PT RICHEY FL 14 CITY - ST - ZIP CITY-ST-ZIP Change Addition 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition 31 TITLE TITLE 32 NAME NAME 33 STREET ADDRESS STREET ADDRESS 34 CHY-ST-ZIP CITY-ST-ZIP Addition Change 41 TITLE TITLE 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS CITY-ST-ZP 44 CITY-ST-ZIP Addition Change 51 TITLE TITLE 52 HAME HAME 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Chango Addition 61 TIRLE TIRLE R 2 NAME NAME STREET ADDRESS 63 STHEET ADDRESS 64 CITY-ST-ZIP City-St-7IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 110.07(3)(k), Fiorida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and occurate and that my signature shall have the same legal effect as if made under early 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. 6-8-95 (813) 868-5031 Jack Reeder, President SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR