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 # F93000001084 (3)

1. Corporation Name
RICHARD E. LIVINGSTON, LTD., INC.

Principal Place of Business	Mailing Address
571 PINE NEEDLE COURT LAKE MARY FL 32746	571 PINE NEEDLE COURT LAKE MARY FL 32746

3. Date Incorporated or Qualified: 02/26/1993
3a. Date of Last Report: 01/26/1995
4. FEI Number: 54-1221939 ☐ 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

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

9. Name and Address of Current Registered Agent

LIVINGSTON, RICHARD E
571 PINE NEEDLE COURT
LAKE MARY FL 32746

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 ______ DATE ______

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LIVINGSTON, RICHARD E		1.2 NAME	
STREET ADDRESS	571 PINE NEEDLE COURT		1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL 32746		1.4 CITY-ST-ZIP	
TITLE	VCVP	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	SPIVEY, LESLIE D		2.2 NAME	
STREET ADDRESS	2604 SOUTH BRIDGE LANE		2.3 STREET ADDRESS	5208 Poplar Court
CITY-ST-ZIP	NAGS HEAD NC 27959		2.4 CITY-ST-ZIP	Kitty Hawk, NC 27949
TITLE	DST	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	RENTON, JEAN E		3.2 NAME	
STREET ADDRESS	1244 LAKE CLAY DRIVE		3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE PLACID FL		3.4 CITY-ST-ZIP	
TITLE	DP	☐ DELETE	4.1 TITLE	D ☒ Change ☐ Addition
NAME	LIVINGSTON, RICHARD E III		4.2 NAME	
STREET ADDRESS	9966 WHITEWATER DRIVE		4.3 STREET ADDRESS	4501 Cox Drive
CITY-ST-ZIP	BURKE VA 22015		4.4 CITY-ST-ZIP	Stow, OH 44224
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			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 E. Livingston — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: Jan. 26, 1996 Daytime Phone #: (510) 420-0513

CR2E034 (12/95)