Addition

Addition

Change

Change

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000006016

1. Corporation Name

RICHTER DIAL BUILDERS, INC.

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90092 045 ***150.00



Principal Place of Business Mailing Address					1 1951140 1112 (2012) 21111 42111 42111 42111 42111	,	17878 8111 1681
		9000 CHURCH STREET EAST BRENTWOOD TN 37027					
				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		ļ
		0. 44-11 4-11			12/11/1995 4. FEI Number	T T	-ti-d Can
2. Principal Place of Business 2a. Mailing Address				** * = * * * * * * * * * * * * * * * *	<u> </u>	plied For t Applicable	
26 Suite, Apt. #, etc. Suite, Apt. #, etc.				62-1390846			
22 27					5. Certifcate of Status Desired Fee Required		
City & State City		City & State	City & State		6. Election Campaign Financing \$5.00 May Be		
23 28					Trust Fund Contribution Added to Fees		
Zip	'		_ Country		8. This corporation owes the current year Intangible Personal Property Tax Personal Property Tax		
24	25	29 30	<u> </u>		1 discital 1 topolity Text		□No
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered Age	<u>nt</u>	
DIAL, JAMES L			81	Ivame			
4804 PALEO PINE CIRCLE			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
FT PIERCE FL'34951			-				
FI FIEROE FL 34931			83				
			84	City	85 Zip Code		
				L	FL °		
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, typed or printed name of registered ager	t and title if applicable (NOTE: Do	nistaced Age	at cionatura recu	uired when reinstating) DATE		
12.		D DIRECTORS	13.	it alginatore requ	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12
TITLE			1.1 TITLE			Change	Addition
NAME			1.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			1.4 CITY-S	1			
TITLE			2.1 TITLE	1-21		Change	☐ Addition
NAME	17		2.2 NAME		_		
STREET ADDRESS				ADDRESS			
			2. 4 City-ST-ZiP				
CITY-ST-ZIP TITLE			3.1 TITLE			Change	Addition
NAME	5.5		32 NAME		_		_[
STREET ADDRESS	THE CONTROL OFFICE FLOT		3.3 STREE	TADDRESS	The second secon		
			3.4. CITY-5				
CITY-ST-ZIP TITLE	DILITITION III	□ DELETE	4.1 TITLE	/: <u> </u>		Change	☐ Addition
NAME			4. 2 NAME			-	_
				FADDRESS			
STREET ADDRESS			4.3 STREE	ייייייייי ו			

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

□ DELETE

☐ DELETE

6153700470