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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **F9600000901**1. Corporation Name

RFS MARKETING SERVICES, INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90140 048 ***150.00



Principal Place of Business Mailing Address						F 1881/88 1110 13110 81111 86114 88111 88	ini wwitt b i	,1161 46)14 	JERRÍ DE	HW1 1181 1981
P.O. BOX 26647 P.O. BOX 26647										
OKLAHOMA CIT	TY OK 73126-0647	OKLAHOMA CITY OK 73126-0647			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed				<u></u>
						02/22/1996				ļ
2. Principal Pl	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Applied For			
21		26			73-1489627	Not Applicable				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.7	5 Ad	ditional	
22	·	27			5. Certificate of Status Desired		Fee	Req	uired	
City & State	е	City & State			6. Election Campaign Financing	1	\$5.6	00 M	lay Be	
23		28			Trust Fund Contribution		Add	led to	Fees	
Zip	Country	Zip				8. This corporation owes the current year Intangible				
24	25 29 30		30			Personal Property Tax.				
<u></u>	9. Name and Address of Current	t Registered Agent	•	81	Mana	10. Name and Address of New Regis	stered A	gent		
СТ	CORPORATION SYSTEM			"	Name					
	SOUTH PINE ISLAND ROAD					ddress (P.O. Box Number is Not Acceptable)				
	NTATION FL 33324									
i LA	11/11/01/12 00024			83						
				84	City		FL	85 Z	Zip Co	ode
		1003 4500 51-11- 01-1				poration submits this statement for the purp		hanging	a ite n	enistered
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was a	authorized	i by ti	he corporation	on's board of directors. I hereby accept the	appoin	tment a	s regi	stered
SIGNATURE						. <u>.</u>				
	Signature, typed or printed name of registered agen			Agent	signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDE:	CTOE	9C IN 12
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICE	LUO AINI	Chan		Addition
TITLÉ	PD	A DELETE	1.1 TI						·gc	
NAME	WINN, HARRY L JR		1.2 N/	_						
STREET ADDRESS	POOL WATER OND DEVO.				ADDRESS					
CITY-ST-ZIP	OKLAHOMA CITY OK 73118	DELETE	1.4 CI 2.1 TI	TY-ST-	-2112			Chan	 10e	Addition
TITLE	V	A DECEME	2.1 II							_
NAME	LAWSON, WILLIAM M J	SON, MILLIAM III O			ADDRESS					
STREET ADDRESS		or water one beto.								
CITY-ST-ZIP	OKLAHOMA CITY OK V	CITY UK 2.4		ITY-ST	-ZIP			Chan	nge	Addition
TITLE	l *		3.2 NAM					_	•	_
NAME STREET ADDRESS	MOENOON, NOBERT A.				ADDRESS					Ì
	OKLAHOMA CITY OK 73118			ITY-ST						
CITY-ST-ZIP	DV	☐ DELETE	4.1 TI		="-			Char	nge	Addition
NAME	TWOMEY, KEVIN J		4. 2 N							İ
STREET ADDRESS			4.3 ST	REET A	ADDRESS					
CITY-ST-ZIP	OKLAHOMA CITY OK 73118		ł	TY-ST-						
TITLE	V	☐ DELETE	5.1 TI					Char	nge	Addition
NAME	SMITH, ROBERT W		5.2 N	AME						ļ
STREET ADDRESS	6301 WATERFORD BLVD.		5.3 ST	REET	ADDRESS					
CITY-ST-ZIP	OKLAHOMA CITY OK 73118_		5.4 CF	TY-ST	-ZIP					
TITLE	VSD	☐ DELETÉ	6.1 TI	TLE				☐ Char	nge	Addition
NAME	ALMOND, DAVID R	•	6.2 N/	AME		2				-
STREET ADDRESS	6301 WATERFORD BLVD.		6.3 ST	TREET /	ADDRESS	Soo Attal	1 1	1)
	ON MICH OFFI ON TOTAL		246	TV CT	71D	(Soo ITHAL	W CO	c0		1

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.

