FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(0)

DOCUMENT #
1. Corporation Name RLS SERVICES, INC.

Principal Place of Business Maung Address											
							101 0701 01011 0		#11 B1#11 #1#11 1##1		
3223 THOMPSON ROAD P.O. BOX 656 LAKELAND FL 33801 LAKELAND FL 338 US US				N2							
UV			00				3. Date Incorporated or Qualified 04/06/1983	3a. Date of Last Report 05/01/1995			
2. Principal Place of Business 2a. 1			Mailing Address				EO 00000EC			Applied For	
2			I <u></u>				59-2388656 Not Applicable				
Suite, Apt. #, etc.			Surte, Apt. #, etc.				5. Certificate of Status Desired	Fee Required			
Orty & State			City & State				6. Election Campaign Financing Trust Fund Contribution Solution So				
Zip Country			Zip Cour				8. This corporation has liability for intangible tax unider s. 199.032,				
24	25	29	,	30			-	□No	. ====		
	9. Name and Address of Curren	t Hegis	tered Agent		81	Name	10. Name and Address of New F	egistered	ageni		
COMM	A TTOOS										
GRIMM, SCOTT A 3223 THOMPSON ROAD LAKELAND FL 33801					82	Street Ac	ldress (P.O. Box Number is Not Acceptab	ole)			
					83						
					_				-1227-3		
					84	City		FL	85 Z	ip Code	
SIGNATURE	, and accept the obligations of, Secting and accept the obligation of specification of repeated agent OFFICERS AN	and the Ju	ay pindaruh (No.)		Açpı	il signal de req	and when reasoning: ADDITIONS/CHANGES TO OFF	CA'E	DIBECT	ORS IN 12	
12.	PD OFFICERS AN	L/ L/INEC	DELETE	1 1 7	ili F	·	ADDITIONS/GITANGES TO OFF		Change		
NAME	GRIMM, SCOTT A			12 N				-		_	
STREET ADDRESS	3223 THOMPSON ROAD			•		I ADDRESS					
CITY-ST-ZIP	LAKELAND, FL 00000					51- 7 (P					
TITLE	V		DELETE	2 1]	174 F			[Change	Addition	
NAME	GRIMM, ERIC			22 N	4ME						
STREET ADDRESS	1400 W. LAKE BONNY DRI	VΕ		23\$	REE	ADORESS					
C:TY-S!-ZIP	LAKELAND FL					ST-ZIP					
TITLE	BROOKS, JOHN		☐ DELETE	3 1 1		-		l	Change	Addition	
NAME	1420 W. LAKE BONNY DR	ME		3 2 N		1					
STREET ADDRESS	LAKELAND FL	1 V L				F ADDRESS					
CITY - ST - ZIP TITLE	S		DELETE	4 1 7		ST · ZIF			Change	Add-tion	
NAME	GRIMM, CHRISTINE M		_ becci.	42 N				'	9		
STREET ADDRESS	920 WEDGEWOOD LANE					: ADORESS					
CITY - ST - 7IP	Lakeland Fl.					ST - ZIP					
TITLE			DELETE	5.11	TLE				Change	Addition	
NAME				52N	AME						
STREET ADDRESS				538	TREE	LADDRESS					
CITY - ST - ZIP						ST - ZIF			o		
TITLE			DELETE	6.1		1			Change	Addition	
NAMÉ	A			62 N							
STREET ADDRESS	Λ					I ADDRESS					
CITY - ST - ZIP	certify that the information supplied	T	of the color and and a situation			ST-ZIP	fy for the exemption stated in Section 11	3 0 7/2 ala Ci			

certify that the information indi-oath; that I am an officer or diri appears in Block 12 or Block 1 report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under from or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name an attachment with an address

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR