

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 # **G60898** (5)
1. Corporation Name

RONEY INTERNATIONAL DETECTIVE SERVICE, INC.



Principal Place of Business

4161 SIDEWINDER TRAIL
P.O. BOX 6171 (32236)
MIDDLEBURG FL 32068
US

Mailing Address

4161 SIDEWINDER TRAIL
P.O. BOX 6171 (32236)
MIDDLEBURG FL 32068
US

3. Date Incorporated or Qualified
09/23/1983

3a. Date of Last Report
04/17/1995

4. FEI Number
59-2323063

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

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 **4161 SIDEWINDER TRAIL** 26 **4161 SIDEWINDER TRAIL**
Suite, Apt. #, etc.

22 **N/A.**
City & State

27 **N/A.**
City & State

23 **MIDDLEBURG, FLORIDA**
Zip

28 **MIDDLEBURG, FLORIDA**
Zip

24 **32068**

Country
CLAY

29 **32068**

Country
CLAY

9. Name and Address of Current Registered Agent

BAGGS, MARION R.
4161 SIDEWINDER TRAIL
MIDDLEBURG FL 32068

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and beneficial owner.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12.

OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
PSDC
BAGGS, MARION R
4161 SIDEWINDER TRAIL
MIDDLEBURG FL 32068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
VTD
BAGGS, SHERLEEN S
4161 SIDEWINDER TRAIL
MIDDLEBURG FL 32068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
V
BAGGS, RORY O.
4161 SIDEWINDER TR.
MIDDLEBURG FL 32068

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

Marion R. Baggs; **MARION R. BAGGS**; 19 APRIL 1996 / 904-282-2909
Signature and typed or printed name of signing officer or director

CR2E034 (12/95)