

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 9:25

DOCUMENT # **G91203** (1)

1. Corporation Name

RAHN'S SERVICE, INCORPORATED

Principal Place of Business

Mailing Address

184 LAKEVIEW DRIVE
HAINES CITY FL 33844

184 LAKEVIEW DRIVE
HAINES CITY FL 33844

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1984

3a. Date of Last Report

05/01/1994

4. FEI Number

59-1723465

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 2812 Hwy 60 East
Suite, Apt. #, etc.

26 2812 Hwy 60 East
Suite, Apt. #, etc.

22 City & State

27 City & State

23 LAKE WALES, FL

28 LAKE WALES, FL

24 Zip

25 Country

29 Zip

30 Country

33853

POIK

33853

POIK

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAHN, DONALD L.
184 LAKEVIEW DRIVE
HAINES CITY FL 33844

81 Name

Donald L. RAHN

82 Street Address (P.O. Box Number is Not Acceptable)

2812 Hwy 60 East

83

84 City

LAKE WALES

FL

85 Zip Code

33853

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

Donald L. Rahn

3/27/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PD
2. NAME	RAHN, DONALD L.
3. STREET ADDRESS	184 LAKEVIEW DRIVE
4. CITY, ST, ZIP	HAINES CITY FL
5. TITLE	VST
6. NAME	RAHN, DONALD L.
7. STREET ADDRESS	184 LAKEVIEW DRIVE
8. CITY, ST, ZIP	HAINES CITY FL
9. TITLE	D
10. NAME	RAHN, DONALD L.
11. STREET ADDRESS	184 LAKEVIEW DRIVE
12. CITY, ST, ZIP	HAINES CITY FL
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE	UST	☒ Change ☐ Addition
6. NAME	Brenda L. RAHN	
7. STREET ADDRESS	2812 Hwy 60 East	
8. CITY, ST, ZIP	LAKE WALES, FL 33853	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the incorporation stated in Section 191.01(4)(b), Florida Statutes. I further certify that the information furnished 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 in an attachment with an address.

SIGNATURE:

Donald L. Rahn
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

3/27/95
Date

813-676-2433
Telephone Number