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

Mailing Address PO BOX 510846

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

Principal Place of Business

SHITE 1

DOCUMENT # **H29627**

1. Corporation Name RETIREMENT DEVELOPMENT CORPORATION, INC.

MELBOURNE BEACH FL 32951 2351 E EAU GALLIE BLVD DO NOT WRITE IN THIS SPACE MELBOURNCE FL 32935 3. Date Incorporated or Qualifed 11/13/1984 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2465039 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation owes the current year Intangible Zip Country Zip No ☐ Yes Personal Property Tax. 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 COOPER, MINTON 82 Street Address (P.O. Box Number is Not Acceptable) 290 MARLIN PLACE MELBOURNE BEACH FL 32951 83 Zip Code 84 City 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. DELETE ☐ Change 1.1 TITLE TITLE COOPER, MINTON 1.2 NAME NAME 290 MARLIN PLACE 1.3 STREET ADDRESS STREET ADDRESS MELBOURNE BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE TITLE COOPER, M. B. 2.2 NAME NAME 4160 RIDGEWOOD RD. 2.3 STREET ADDRESS STREET ADDRESS JACKSON MS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETÉ Change 3.1 TITLE TITLE COOPER, JOYCE T. 3.2 NAME NAME 4160 RIDGEWOOD RD 3.3 STREET ADDRESS STREET ADDRESS JACKSON MS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 4.1 TITLE TITLE 4 2 NAME COOPER, CATHERINE F. NAME 4.3 STREET ADDRESS 290 MARLIN PLACE STREET ADDRESS MELBOURNE BCH FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition

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.

51 TITLE

5.2 NAME 5 3 STREET ADDRESS

6.1 TITLE

6.2 NAME

54 CITY-ST-7IP

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE: ______

TITLE

TITI F

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NG OFFICER OR DIRECTOR

DELETE

☐ DELETE

2-11-95 Date

601/362-3224

☐ Change

Addition

CR2E034 (11/98)

FILED Mar 06, 1999 8:00 am

Secretary of State

03-06-1999 90079 001 ***158.75