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Apr 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H63849

(4)

1. Corporation Name

RINK REYNOLDS ARCHITECTS, P.A.

Principal Place of Business

1200 RIVERPLACE BLVD.
SUITE 200
JACKSONVILLE FL 32207
US

Mailing Address

1200 RIVERPLACE BLVD.
SUITE 200
JACKSONVILLE FL 32207-1814
US

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt # etc

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

RINK, JAMES E., JR.
1200 RIVERPLACE BLVD.
SUITE 200
JACKSONVILLE FL 32207

3. Date Incorporated or Qualified

06/25/1985

3a. Date of Last Report

04/10/1996

4. FEI Number

59-2584959

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

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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME RINK, JAMES E., JR.
STREET ADDRESS 1200 RIVERPLACE BLVD., SUITE 200
CITY-ST-ZIP JACKSONVILLE FL

TITLE VTD
NAME REYNOLDS, THOMAS W., JR.
STREET ADDRESS 1200 RIVERPLACE BLVD., SUITE 200
CITY-ST-ZIP JACKSONVILLE FL

TITLE S
NAME GUNNELLS, ROY O.
STREET ADDRESS 1200 RIVERPLACE BLVD., SUITE 200
CITY-ST-ZIP JACKSONVILLE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE S
1.2 NAME FISHER, THOMAS J.
1.3 STREET ADDRESS 1200 RIVERPLACE BLVD., SUITE 200
1.4 CITY-ST-ZIP JACKSONVILLE FL 32207

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

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

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

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

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

14. I do 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 registered agent 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES E. RINK JR. 31 Mar 97 904-396-6353

Date

Daytime Phone #

CR2E034 (9/96)