

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

FILED
Sep 16, 1999 8:00 am
Secretary of State

09-16-1999 90002 040 ***158.75

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

H78999
RAC Realty Company

Principal Place of Business

Mailing Address

5104 So. Ridgewood Ave.
Port Orange, Fla. 32127

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9/30/85

4. FEI Number

592600292

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 5104 So. Ridgewood Ave

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27

23 City & State

28 City & State

Port Orange, FL, US

29 Zip

Country

24 32127

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Roy A. Coleman
5104 So. Ridgewood Ave.
Port Orange, Fla. 32127

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 Roy A. Coleman Pres. Sec.

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

9/10/99

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE Pres. Sec. & Treas. ☐ DELETE
NAME Roy A. Coleman
STREET ADDRESS 5104 So. Ridgewood Ave.
CITY-ST-ZIP Port Orange, Fla. 32127

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

TITLE Vice Pres. ☐ DELETE
NAME Rosemary Cucchiaro
STREET ADDRESS 1846 Coco Palm
CITY-ST-ZIP Edgewater, Fla. 32141

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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.

SIGNATURE: Roy A. Coleman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/99

Date

904-762-6771

Daytime Phone #

CR2E034 (11/98)