

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90745 030 ***150.00

DOCUMENT # H90597

1. Entity Name

RSR MANAGEMENT CORP



Principal Place of Business

4405 METRIC DRIVE
WINTER PARK FL 32792

Mailing Address

4405 METRIC DRIVE
WINTER PARK FL 32792

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number
59-2611433

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

STEGER, ROBERT C.
4405 METRIC DRIVE
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	STEGER, ROBERT C.	
STREET ADDRESS	4405 METRIC DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WEISENFORD, JOANN	
STREET ADDRESS	4405 METRIC DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	TREGO, SHARON	
STREET ADDRESS	4405 METRIC DR	
CITY-ST-ZIP	WINTER VPK FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	BLEWS, RICHARD R	
STREET ADDRESS	4405 METRIC DR.	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	SLOGAR, JOHN E	
STREET ADDRESS	4405 METRIC DR.	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	MAROTTA, CHRISTINA	
STREET ADDRESS	4405 METRIC DRIVE	
CITY-ST-ZIP	WINTER PARK FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SUNDERMANN, KRISTEN	
STREET ADDRESS	4405 METRIC DRIVE	
CITY-ST-ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	WINTER PARK FL	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

John E. Slogar

SIGNATURE: *John E. Slogar* Vice President

April 30, 2004 404-677-6114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #