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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77897

1. Corporation Name

(3)

RICHARD C. THOMAS R.L.S., INC.

| Principal Place                        | e of Business  | Mailing A  | Address                                 |  |                      |  | -   | OTO OFOR GODE                         | Milit Aldii            | Albii (FB)                 |
|--|--|--|---|--|----------------------|--|---|---------------------------------------|------------------------|----------------------------|
| 2322 ALAMEDA<br>SUITE-4<br>SARASOTA FE |  |  | P O BOX 262<br>SARASOTA FL 34230-0262   |  |                      |  |   |                                       |                        |                            |
| US-                                    |  |  |   |  |                      |  | 3. Date Incorporated or Qualified 06/09/1987  | 3a. Date of Last Report<br>05/01/1996 |                        |                            |
| 2. Principal Pi                        | lace of Business   | 28. Mailir                                       | ng Address                              |  |                      | ······································ | 4. FEI Number   |                                       |                        | oplied For                 |
|  | Z ALAMEDA AVE.   | 26   |   |  |                      |  | 59-2815210  |                                       | No.                    | ot Applicable              |
| Suite, Apt                             |  | 27   |   |  |                      |  | 5. Certificate of Status Desired Fee Required                                       |                                       |                        |                            |
|  | RAGOTA   | 28   |   |  |                      |  | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees  |                                       |                        |                            |
| Zip                                    | Country  | Zip  |   |  |                      |  | 8. This corporation has liability for intangible tax under s. 199.032,              |                                       |                        |                            |
| 24 376                                 | 9. Name and Address of Current   | 29   |   |  |                      |  | Florida Statutes Yes You 10. Name and Address of New Registered Agent               |                                       |                        |                            |
| *110                                   |  | negistered                                       | Wani                                    |  | 81                   | Name                                   | 10. Name and Address of New Ne  | Alereaen Wi                           | <del>ont</del>         |                            |
|  | MAS, RICHARD C.  |  |   | Ĺ  |                      |  |   |                                       |                        |                            |
|  | ALAMEDA AVENUE   |  |   | j  | 82                   | Street Addre                           | s (P.O. Box Number is Not Acceptable)   |                                       |                        |                            |
| SAH                                    | ASOTA FL 34234   |  |   | F  | 83                   | <u></u>                                |   |                                       |                        |                            |
|  |  |  |   |  | 84                   | City                                   |   |                                       | <b>85</b> Zip          | Code                       |
|  |  |  | *************************************** |  |                      | · · · · · · · · · · · · · · · · · · ·  |   |                                       |                        |                            |
| office or reagent. Lac                 | to the provisions of Sections 607,0502<br>egistered agent, or both, in the State of<br>m familiar with, and accept the obligat | and 607.150<br>If Florida, Sui<br>ions of, Secti | ch change was<br>ion 607.0505, Fl       | ites, ine ab<br>authorized<br>lorida Stati | iove<br>I by<br>Ites | e-named corporations:                  | oration submits this statement for the p<br>on's board of directors. I hereby accep | urpose of co<br>t the appoin          | nanging n<br>ntment as | s registered<br>registered |
|  | Signature, typed or pointed name of registered agon  | and little if applic                             | able (NO                                | TE Registered                              | Age                  | nt signature require                   | ed when reinstating)  | DATE                                  |                        |                            |
| 12.                                    | OFFICERS AND   | DIRECTORS  |   | 13.  |                      |  | ADDITIONS/CHANGES TO OFFIC  |                                       |                        |                            |
| JULE                                   | PTO  |  | ☐ DELETE                                | 1.1 110                                    |                      |  |   | L                                     | J Change               | L_j Addition               |
| NAME                                   | THOMAS, RICHARD C.   |  |   | 1.2 NA                                     |                      |  |   |                                       |                        |                            |
| STREET ADDRESS                         | 2322 ALAMEDA AVE.  |  |   |  | ,                    | ADDRESS                                |   |                                       |                        |                            |
| City-SI-ZiP<br>Title                   | SARASOTA FL<br>VD  | <u>-</u>   | DELETE                                  | 1.4 CIT<br>21 TIT                          |                      | T-ZIP                                  |   |                                       | Change                 | Addition                   |
| NAME                                   | WALKER, ANN C.   |  | ☐ 01.001E                               | 2.2 NA                                     |                      | 1                                      |   | <b>I</b>                              | ] Unange               | ויייווטא נבן               |
| STREET ADDRESS                         | 2322 ALAMEDA AVE.  |  |   |  |                      | ADDRESS                                |   |                                       |                        |                            |
| CITY-ST-ZIF                            | SARASOTA FL  |  |   | 2 4 Ci                                     |                      |  |   |                                       |                        | -                          |
| TIME                                   | OALAGOTA TE  |  | ☐ DELETE                                | 31 TIT                                     |                      | 51-21r                                 |   | L                                     | Change                 | Addition                   |
| NAME                                   |  |  |   | 3.2 NAI                                    | ME                   |  |   | _                                     |                        |                            |
| STREET ADDRESS                         |  |  |   | 3.3 STF                                    | REET                 | ADDRESS                                |   |                                       |                        |                            |
| CITY-ST-ZIP                            |  |  |   | 3.4. CI                                    | TY-S                 | ST-ZIP                                 |   |                                       |                        |                            |
| TITLE                                  |  |  | DELETE                                  | 4.1 TIT                                    | LE                   |  |   | T                                     | Change                 | Addition                   |
| NAME                                   |  |  |   | 4. 2 NA                                    | ME                   |  |   |                                       |                        |                            |
| STHEFT ADDRESS                         |  |  |   | 4.3 ST                                     | REET                 | ADDRESS                                |   |                                       |                        |                            |
| CITY-ST ZIP                            | ·  |  |   | 4.4 CIT                                    | _                    | T-ZIP                                  |   |                                       | 7                      |                            |
| TITLE                                  |  |  | ☐ DELETE                                | 5.1 117                                    |                      |  |   | L                                     | J Change               | Addition                   |
| NAME                                   |  |  |   | 5.2 NA                                     |                      | ļ                                      |   |                                       |                        |                            |
| STREET ADDRESS                         |  |  |   |  |                      | ADDRESS                                |   |                                       |                        | 1                          |
| CITY-ST ZIP                            |  |  | DELETE                                  | 5.4 CIT                                    | •••••                | T- ZIP                                 |   |                                       | Change                 | [ Addition                 |
| TIFLE                                  |  |  | T hereit                                | 6.1 TIT                                    |                      |  |   | L                                     | i nigude               | Modition                   |
| NAME<br>CIRCL ADDRESS                  |  |  |   | 62 NA/                                     |                      | ADDOCCC                                |   |                                       |                        |                            |
| STREET ADDRESS                         |  |  |   |  |                      | ADDRESS                                |   |                                       |                        |                            |
| 14. Loo hereb                          | by certify that the information supplied   | with this filin                                  | a does not aust                         | 64 Cit                                     |                      |  | in Section 119.07(3)(i), Florida Statute  | s I further o                         | ertify that            | the                        |
| informatio<br>Lam an of                | in indicated on this annual report or su   | pplemental a<br>he receiver c                    | annual report is<br>or trustee empor    | true and a wered to e                      | ccu                  | irate and that                         | my signature shall have the same lega<br>t as required by Chapter 607, Florida S    | l effect as if                        | made un                | ider oath; that            |

SIGNATURE: Kell CTM - RICHARO C. THOMAS, PRES. 4/14/97 941-955-2602