

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K99098

1. Entity Name

R.H.F. MANAGEMENT INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90098 038 ***158.75

Principal Place of Business

Mailing Address

408 SE AVENUE E
STE. 103
BELLE GLADE FL 33430

408 SE AVENUE E
STE. 103
BELLE GALDE FL 33414-8091
US

2. Principal Place of Business

12669 WHITE CORAL DR.

3. Mailing Address

12669 WHITE CORAL DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Wellington, FL

City & State

Wellington, FL

4. FEI Number

65-0134935

Applied For

Not Applicable

Zip

33414 FLA

Zip

33414 USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEETS, FRANK D
12669 WHITE CORAL DR.
WELLINGTON FL 33414

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete

NAME TEETS, FRANK D
STREET ADDRESS 12669 WHITE CORAL DR.
CITY-ST-ZIP WELLINGTON FL

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME TEETS, SUE C
STREET ADDRESS 12669 WHITE CORAL DR.
CITY-ST-ZIP WELLINGTON FL

TITLE ☐ Change ☐ Addition

TITLE STD ☐ Delete

NAME TEETS, FRANK D, JR
STREET ADDRESS 1384 PRIMROSE LANE
CITY-ST-ZIP WELLINGTON FL

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME TEETS, JAMES CRAWFORD
STREET ADDRESS 1451 SAILBOAT CIRCLE
CITY-ST-ZIP WELLINGTON FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FRANK D. TEETS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-00

Date

561-791-3256

Daytime Phone #

CR2E034 (9/99)