

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PH 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L82839

(6)

1. Corporation Name

R.D. & F ASSOCIATES, INC.

Principal Place of Business

4525 FOREST GLEN DR.
N. FT. MYERS FL 33903

Mailing Address

4525 FOREST GLEN DR.
N. FT. MYERS FL 33903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/22/1990

3a. Date of Last Report

05/09/1994

4. FEI Number

65-0209868

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. 199.022,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 2408 NW 89th St.

22 City & State

27 City & State

23 Zip

Country

28 Bradenton, FL

29 Zip

Country

24

25

29 34209

30 MANATEE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, RICHARD L.
4525 FOREST GLEN DR.
N. FT. MYERS FL 33903

01 Name

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

03

04 City

FL

05 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 on this page only)

(Signature typed or printed name of registered agent on this page only)

(Signature typed or printed name of registered agent on this page only)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

01 TITLE	STD
02 NAME	WILLIAMS, DAWNE E.
03 STREET ADDRESS	4525 FOREST GLEN DR.
04 CITY, ST, ZIP	N. FT. MYERS FL
05 TITLE	CPD
06 NAME	WILLIAMS, RICHARD L.
07 STREET ADDRESS	4525 FOREST GLEN DR.
08 CITY, ST, ZIP	N. FT. MYERS FL
09 TITLE	
10 NAME	
11 STREET ADDRESS	
12 CITY, ST, ZIP	
13 TITLE	
14 NAME	
15 STREET ADDRESS	
16 CITY, ST, ZIP	
17 TITLE	
18 NAME	
19 STREET ADDRESS	
20 CITY, ST, ZIP	
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
25 TITLE	
26 NAME	
27 STREET ADDRESS	
28 CITY, ST, ZIP	
29 TITLE	
30 NAME	
31 STREET ADDRESS	
32 CITY, ST, ZIP	

1. TITLE	-
2. NAME	-
3. STREET ADDRESS	2408 NW 89th St.
4. CITY, ST, ZIP	Bradenton, FL 34209
5. TITLE	-
6. NAME	-
7. STREET ADDRESS	2408 NW 89th St.
8. CITY, ST, ZIP	Bradenton, FL 34209
9. TITLE	-
10. NAME	-
11. STREET ADDRESS	-
12. CITY, ST, ZIP	-
13. TITLE	-
14. NAME	-
15. STREET ADDRESS	-
16. CITY, ST, ZIP	-
17. TITLE	-
18. NAME	-
19. STREET ADDRESS	-
20. CITY, ST, ZIP	-
21. TITLE	-
22. NAME	-
23. STREET ADDRESS	-
24. CITY, ST, ZIP	-

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.022(3)(b), Florida Statutes. I further certify that the information furnished 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 and am authorized to receive or transmit correspondence to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing. If changed, or if my appointment with an address.

SIGNATURE:

(Signature typed or printed name of signing officer on this page only)

Richard L. Williams, 4/25/95

815-798-6054