

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M66948

1. Entity Name
R & M TAX SERVICES, INC.



Principal Place of Business
75 CAMBRIDGE DR
GRAYSLAKE, IL 60030 US

Mailing Address
75 CAMBRIDGE DR
GRAYSLAKE, IL 60030 US

FILED
Jul 09, 2008 08:00 AM
Secretary of State



07052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2863267	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SLATKIN, SHELDON T., ESQ.
9900 W. SAMPLE RD.
HANOVER BANK PLAZA, SUITE 400
CORAL SPRINGS, FL 33065

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature: typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUNKER, RODNEY S.
STREET ADDRESS	75 CAMBRIDGE DR
CITY-ST-ZIP	GRAYSLAKE, IL
TITLE	D
NAME	BUNKER, MARIE M.
STREET ADDRESS	75 CAMBRIDGE DR
CITY-ST-ZIP	GRAYSLAKE, IL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000955856
07/09/08-80008-018 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: R. J. Beaulieu
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/08 847 223-4444
Date Daytime Phone #