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Feb 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M85652

(9)

1. Corporation Name
RHEMA DEVELOPMENT CORPORATION

Principal Place of Business

1920 VERANO DR. #202
PO BOX 1655
HAINES CITY FL 33845-8655
US

Mailing Address

1920 VERANO DR #202
P O BOX 1655
HAINES CITY FL 33845-1655

2. Principal Place of Business

21 805 Peninsular Drive
Suite, Apt. #, etc.

22

City & State

23 Haines City, Fla.

Zip

24 33844

Country

25 Polk

2a. Mailing Address

26 P.O. Box 1655
Suite, Apt. #, etc.

27

City & State

28 Haines City, Fla.

Zip

29 33845

Country

30 Polk

9. Name and Address of Current Registered Agent

TAYLOR, LOYD DEAN
1920 VERANO DR #202
HAINES CITY FL 33845-8655

3. Date Incorporated or Qualified

06/16/1988

3a. Date of Last Report

06/07/1996

4. FEI Number

59-2899647

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. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 *Lloyd Dean Taylor*
Signature of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-10-97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D TAYLOR, LOYD DEAN
STREET ADDRESS
805 PENINSULAR DRIVE
CITY - ST - ZIP
HAINES CITY FL

TITLE ☐ DELETE

NAME
D COMBEE, MARY RUTH TAYLOR
STREET ADDRESS
8305 LAKE MARION RD.
CITY - ST - ZIP
HAINES CITY FL

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Lloyd Dean Taylor, President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-97

Date

Daytime Phone

(941) 422-4386

CR2E034 (9/96)