FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 30 1998 8:00am Secretary of State

	MENT # M9166 RD PROPERTIES, INC.	6 (1)			
Principal Place		Mailing Address		i regional tit main main mill num att dini dil	711 BLB11 BIB11 BIB11 BIB11 1881
% RICHARD R. HOWARD, SR. 1732 U.S. 27 NORTH #A		SRICHARD R. HOWARD, SR. 1732 U.S. 27 NORTH #A			
AVON PARK FL 33825		AVON PARK FL 33825		DO NOT WRITE IN THIS	SPACE
				 Date Incorporated or Qualified 07/25/1988 	
	lace of Business	24. Mailing Address		4. FEI Number	Applied For
21 26 Suite, Apt. #, etc.		Suite, Apt #, etc.		59-2027504	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]	,	Trust Fund Contribution	Added to Fees
Zιρ	Country	- 7 ^(p)	Country	8. This corporation owes or has paid the c	
24	9. Name and Address of Curren	1 Begistered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
но	WARD, RICHARD B., SR.	Tioglistorius regult	81 Name	TO, Hame and Addition of Hear Heighborn	. Ago
1732 U.S. 27 NORTH			82 Street Add	dropp (D.O. Boy Number in Not Apportuble)	
SUITE A			62 Street Acc	dress (P.O. Box Number is Not Acceptable)	
AVON PARK FL 33825			83		
			84 City	F	85 Zip Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or profited name of registrating	of Florida, Such change was a dions of, Section 607,0505, Floridadd Philipped albeit (NOT	authorized by the corpora		ppointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PTSD HOWARD, RICHARD R., SR	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	1732 U.S. 27 NORTH #A		1.2 NAME		
STREET ADDRESS	AVON PARK FL		1.3 STREET ADDRESS		۱,
CHY-ST-ZIP TITLE		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CHTY-ST-ZIP		
FITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		ľ
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETÉ	34. City-St-ZIP		Change Addition
NAME			4.2 NAME		C Change C Assistan
STREET ADDRESS			4 3 STREET ADDRESS		İ
CITY-ST-ZIP			4.4 City-St-ZiP		
TITLE		DELETE	5.1 Title		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		<u>.</u>
TITLE		☐ DELETÉ	6 1 TITLE		Change Addition
NAME			6.2 NAME)
STREET ADDRESS			6.3 STREET ADDRESS		ļ
CITY-ST-ZIP	ertily that the information supplied wi	th this filing does not qualify to	6.4 CITY-ST-ZIP	Section 119.07(3)(i) Florida Statutes I further of	pertify that the information

indicated on this annual report or supplied with an sining does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. Further certify that the information indicated on this annual report or supplemental arrival 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 to an appear of 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 to an appear of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes.