

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 07, 2002 8:00 am**  
**Secretary of State**

02-07-2002 90028 030 \*\*\*150.00

DOCUMENT # 000000009340

1. Entity Name

RV GROUP, NET, INC.

**DO NOT WRITE IN THIS SPACE**

B0018421

2. Principal Place of Business

4358 TIMUQUANA RD

3. Mailing Address

SAME

Suite, Apt. #, etc.

#154

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

32210-8572 DUVAL

Zip

Country

4. FEI Number

05-0981016

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

PAULA H. TAYLOR

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

4358 TIMUQUANA RD #154

City

JACKSONVILLE

FL

Zip Code

32210-8572

**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.

SIGNATURE PAULA H. TAYLOR

x

Paula H. Taylor

1-18-02

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) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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

TITLE PRESIDENT & CEO  
NAME JAMES R. GEIGER  
STREET ADDRESS 421 VALERIE ST.  
CITY-ST-ZIP SANTA MARIA, CA. 93454

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES R. GEIGER, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-02

Date

800-78X-7687

Daytime Phone #

CR2E034B (12/01)