

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000016692**1. Entity Name
RMB, INC.**FILED**
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90027 017 ***150.00

Principal Place of Business

**610 GARDENIA LANE
VERO BEACH FL 32963**

Mailing Address

**610 GARDENIA LANE
VERO BEACH FL 32963****PO BOX 3877
VERO BEACH, FL
32964-3877**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**VERO BEACH, FL
32964-3877**

4. FEI Number

65-1023060

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROBB, BAYARD V
610 GARDENIA LANE
VERO BEACH FL 32963**

Name

BAYARD V. ROBB, JR

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

2720 CARDINAL DR.

City

VERO BEACH

FL

Zip Code

32963

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

BAYARD V. ROBB, JR

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/01/20

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	ROBB, BAYARD V	610 GARDENIA LANE VERO BEACH FL 32963	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	D	ROBB, BAYARD V JR.	2720 CARDINAL DRIVE VERO BEACH FL 32963	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	D	ROBB, MICHAEL W	POST OFFICE BOX 3877 VERO BEACH FL 32964-3877	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BAYARD V. ROBB, JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/01/20

Date

561 564 4759

Daytime Phone

CP2E034 (10/00)