

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2002 8:00 am
Secretary of State

02-17-2002 90053 037 ***158.75

DOCUMENT # P00000079263

1. Entity Name
RCC ENTERTAINMENT, INC.

Principal Place of Business

**1513 S LANE AVE
 JACKSONVILLE FL 32210**

Mailing Address

**1513 S LANE AVE
 JACKSONVILLE FL 32210**



2. Principal Place of Business

Shooters, Sports, Bars & Billiards 1513 S Lane Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

JAX, Fla

City & State

JAX, Fla

4. FEI Number

59-3671305

Applied For

☒ Not Applicable

Zip

32210

Country

United States

Zip

32210

Country

United States

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CAYTON, BRIDGET
 1513 S LANE AVE
 JACKSONVILLE FL 32210**

7. Name and Address of New Registered Agent

Name **Ray W Bullard**

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

4548 Lynch Rd

City **JAX**

FL

Zip Code

32210

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

Ray W Bullard President 31-02

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) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 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

TITLE **P** ☒ Delete
 NAME **CAYTON, BRIDGET**
 STREET ADDRESS **9066 NO. RD**
 CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE **VP** ☒ Delete
 NAME **HALL, RONNIE**
 STREET ADDRESS **1513 S. LANE AVE**
 CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE **S** ☒ Delete
 NAME **CAYTON, GUT**
 STREET ADDRESS **9066 NO. RD**
 CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
 NAME **Ray, W. Bullard**
 STREET ADDRESS **1513 S Lane Ave**
 CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE **Vice President** ☒ Change ☐ Addition
 NAME **Louise R. Wilson**
 STREET ADDRESS **4609 Lynch Rd**
 CITY-ST-ZIP **Jacksonville, Fla, 32210**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Ray W Bullard

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/02 786-1522

Date

Daytime Phone #

CR2E034 (9/01)