

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 8:00 am
Secretary of State

07-16-2004 90012 040 ***150.00

DOCUMENT # P01000017305

1. Entity Name
RTM CONSULTANTS, INC.



Principal Place of Business
**6135 BAYOU GRANDE BLVD NE
ST PETERSBURG, FL 33703**

Mailing Address
**6135 BAYOU GRANDE BLVD NE
ST PETERSBURG, FL 33703**

54062910



2. Principal Place of Business
13108 Angler St.
Suite, Apt. #, etc.

3. Mailing Address
13108 Angler St.
Suite, Apt. #, etc.

07132004 Chg-P CR2E034 (10/03)

City & State
Spring Hill, FL
Zip
34609
Country
USA

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Spring Hill, FL
Zip
34609
Country
USA

4. FEI Number
59-3697293
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**MEYER, TIMOTHY C
6135 BAYOU GRANDE BLVD NE
ST PETERSBURG, FL 33703**

7. Name and Address of New Registered Agent

Name **Timothy C. Meyer**
Street Address (P.O. Box Number is Not Acceptable)
13108 Angler St
City **Spring Hill** FL Zip Code **34609**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE **7-14-04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MEYER, TIMOTHY C**
STREET ADDRESS **6135 BAYOU GRANDE BLVD NE**
CITY-ST-ZIP **ST PETERSBURG, FL 33703**

TITLE **D** ☐ Delete
NAME **MEYER, ROBERT A**
STREET ADDRESS **6135 BAYOU GRANDE BLVD NE**
CITY-ST-ZIP **ST PETERSBURG, FL 33703**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **Meyer, Timothy C**
STREET ADDRESS **13108 Angler St.**
CITY-ST-ZIP **Spring Hill, FL 34609**

TITLE ☒ Change ☐ Addition
NAME **Meyer, Robert A**
STREET ADDRESS **13108 Angler St.**
CITY-ST-ZIP **Spring Hill, FL 34609**

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE **7-14-04** 352-664-4483
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #