

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

FILED
Sep 12, 2002 8:00 am
Secretary of State

DOCUMENT # P01000049756

1. Entity Name

R.N.J. HOLDINGS INC

09-12-2002 90106 001 ***150.00

09-12-2002 90106 002 ***400.00

DO NOT WRITE IN THIS SPACE

99241

2. Principal Place of Business
6900 DANIELS RD.

Suite, Apt. #, etc.

3. Mailing Address
6900 DANIELS RD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
FORT MYERS, FL

Zip
33907

Country USA

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FORT MYERS, FL

Zip
33907

Country USA

4. FEI Number
65-1105843

Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name RICHARD SCOTT BARKER

Street Address (P.O. Box Number is Not Acceptable)
12734 KENWOOD LANE #5

City FORT MYERS FL Zip Code 33907

8. The above named entity adopts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

RICHARD SCOTT BARKER

(NOTE: Registered Agent signature required when reinstating)

09.10.02

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 \$81.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
JEFF HUNSUCKER D P S
1682 N. HERMITAGE RD
FORT MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RICHARD SCOTT BARKER D VP T
227 21st St SW
CAPE CORAL, FL 33904

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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 owner 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 full power like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD SCOTT BARKER VICE
PRESIDENT

09.10.02

DATE

239.275.0000

Daytime Phone #

CR2E034B (12/01)