

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000011145

Entity Name: RBD OF JACKSONVILLE, INC.

FILED
Jan 24, 2007
Secretary of State

Current Principal Place of Business:

345 WATERS EDGE DR.
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

345 WATERS EDGE DR.
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 41-2029869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLAZIER & GLAZIER, P.A.
8825 PERIMETER PARK BLVD., STE. 504
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENTON, LURA ANN
Address: 345 WATERS EDGE DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: RUSSELL, MICHAEL THOMAS
Address: 12408 CR 137
City-St-Zip: WELLBORN, FL 32094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL THOMAS RUSSELL

D

01/24/2007

Electronic Signature of Signing Officer or Director

Date