

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2003 8:00 am
Secretary of State
08-01-2003 90064 048 ***150.00

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AV

DOCUMENT # P02000129397

1. Entity Name
RCS GROUP, INC.



Principal Place of Business
1648 FLAGLER AVENUE
JACKSONVILLE FL 32207

Mailing Address
1648 FLAGLER AVENUE
JACKSONVILLE FL 32207

2. Principal Place of Business

1805 ATLANTIC BLVD
Suite, Apt. #, etc.

3. Mailing Address

1805 ATLANTIC BLVD
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

4. FEI Number

56-2305828

Applied For

Not Applicable

Zip

32207

Country

USA

Zip

32207

Country

USA

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

6. Name and Address of Current Registered Agent

KING, CLIFFORD M
2033 MAIN STREET SUITE 303
SARASOTA FL 34237

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: PRESIDENT
NAME: MICHAEL M DOOLY
STREET ADDRESS: 1805 ATLANTIC
CITY-ST-ZIP: JACKSONVILLE FL 32207

☐ Delete

TITLE: SECRETARY
NAME: MICHAEL M DOOLY
STREET ADDRESS: 1805 ATLANTIC BLVD
CITY-ST-ZIP: JACKSONVILLE FL 32207

☐ Delete

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

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TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

☐ Change ☐ Addition

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____

☐ Change ☐ Addition

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CITY-ST-ZIP: _____

☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL M DOOLY PRESIDENT
904 346-0300

Date

Daytime Phone #

CR2E034 (4/03)

attachment



August 1, 2003

80135502
#P02000129397

Florida Department of State
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2003 for Profit Corporation
Uniform Business Report
Document #P02000129397

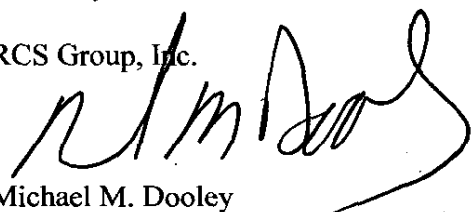
To Whom It May Concern:

RCS Group, Inc. did not receive a first notice Uniform Business Report. Therefore, as indicated in the instructions, we are enclosing this letter and a check in the amount of \$150.00 for the filing fee.

Please let me know if you have any additional questions.

Sincerely,

RCS Group, Inc.


Michael M. Dooley
President

cc: File

GENERAL CONTRACTORS

1805 ATLANTIC BLVD JACKSONVILLE, FL 32207

www.rcsgroupinc.com

CONSTRUCTION MANAGERS

TEL 904-346-0300 FAX 904-346-0304

CGC1505642