

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000038294

Entity Name: RCM CONSTRUCTION, INC.

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4900 S.W. 46TH CT., UNIT 412  
OCALA, FL 344746269

**New Principal Place of Business:**

**Current Mailing Address:**

4900 S.W. 46TH CT., UNIT 412  
OCALA, FL 344746269

**New Mailing Address:**

FEI Number: 56-2339471

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PIKE, RONALD L  
4900 S.W. 46TH CT., UNIT 412  
OCALA, FL 344746269 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: PIKE, RONALD L  
Address: 4900 S.W. 46TH CT., UNIT 412  
City-St-Zip: OCALA, FL 344746269

Title: V  
Name: PIKE, CATHERINE S  
Address: 4900 S.W. 46TH CT., UNIT 412  
City-St-Zip: OCALA, FL 344746269

I hereby 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 all other like empowered.

SIGNATURE: RONALD L PIKE

PSTD

04/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date