

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90396 001 ***211.25

DOCUMENT # P03000052100

1. Entity Name
RIVER CITY SEAFOOD, INC.



Principal Place of Business
**720 BLACKSTONE BLVD
JACKSONVILLE, FL 32202**

Mailing Address
**720 BLACKSTONE BLVD
JACKSONVILLE, FL 32202**

66012343



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04242006 Chg-P CR2E034 (11/05)

City & State

City & State

4. FEI Number
55-0832781

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROLFE, LAWRENCE C
720 BLACKSTONE BLVD
JACKSONVILLE, FL 32202**

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 \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CORRALES, SAMUEL M
11527 WOODGLEN WAY
JACKSONVILLE, FL 32223** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
CORRALES, SAMUEL M.
11527 WOODGLEN WAY
JACKSONVILLE, FL 32202** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROLFE, LAWRENCE C
720 BLACKSTONE BLVD
JACKSONVILLE, FL 32202** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S/T/D
ROLFE, LAWRENCE C.
720 BLACKSTONE BUILDING
JACKSONVILLE, FL 32202** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Date

Daytime Phone #

4/26/06

ATTACHMENT

04/24/2006 4:23PM

Check #: 213534 Printed: 4/24/2006

Payee: DEPARTMENT OF STATE
DEPARTMENT OF STATE
P.O. BOX 6250

TALLAHASSEE, FL 32314

66012343

#P03000052100 & N13841

Case	Description	Amount
	Court File Number	
ROLFE & LOBELLO, P.A. vs. ZZ/ROLFE	971812.001 SEC OF STATE for: Jacksonville Skunk & Trap Club, Inc. Doc # N13841	61.25
ROLFE & LOBELLO, P.A. vs. ZZ/ROLFE	971812.001 SEC OF STATE for: Jacksonville Skunk & Trap Club, Inc.	150.00
Check Amount		<u>\$211.25</u>
for: River City Seafood, Inc. Doc # P03000052100		