


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 08:00 AM
Secretary of State

DOCUMENT # P03000141558 1. Entity Name R&K2, INC.	
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Principal Place of Business 215 FOXWOOD ROAD DEATSVILLE, AL 36022	Mailing Address 215 FOXWOOD ROAD DEATSVILLE, AL 36022
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DO NOT WRITE IN THIS SPACE



01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0428458	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

EMERY, MARK W
918 W. DIXIE AVENUE
LEESBURG, FL 34748

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULER, ROGER L 215 FOXWOOD ROAD DEATSVILLE, AL 36022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SCHULER, ROGER L 217 FOXWOOD RD DEATSVILLE, AL 36022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA SCHULER, ROGER L 217 FOXWOOD RD DEATSVILLE, AL 36022
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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: *Roger L. Schuler* **ROGER L. SCHULER** *2/11/08* **354**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #