

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90259 016 ***150.00

DOCUMENT # P03000146602

1. Entity Name

R.K.M. CORPORATION



Principal Place of Business

23618 NW 206 AVE
HIGH SPRINGS FL 32643

Mailing Address

23618 NW 206 AVE
HIGH SPRINGS FL 32643

34050133

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

EIN 57-1197460

Applied For

Not Applicable

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

AFFRON, RICKY L
23618 NW 206 AVE
HIGH SPRINGS FL 32643

Name Ricky L Affron

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

23812 N.W. 206 Ave.

City High Springs

FL

Zip Code 32643

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

Ricky L Affron

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, 2004: Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME AFFRON, RICKY L
STREET ADDRESS 23618 NW 206 AVE
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE **P** ☒ Change ☐ Addition
NAME
STREET ADDRESS 23812 NW 206 Ave
CITY-ST-ZIP

TITLE **ST** ☐ Delete
NAME AFFRON, MELANIE B
STREET ADDRESS 23618 NW 206 AVE
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE **ST** ☒ Change ☐ Addition
NAME
STREET ADDRESS 23812 N.W. 206 Ave
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME BARNETT, KEVIN C
STREET ADDRESS 23618 NW 206 AVE
CITY-ST-ZIP HIGH SPRINGS FL 32643

TITLE **V** ☒ Change ☐ Addition
NAME
STREET ADDRESS 23812 N.W. 206 Ave
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Ricky L Affron
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-2004
Date

Daytime Phone #