2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P0400091801' 1. Entity Name R.D.I., INC.						FIL 06 MAY 30		39		
Principal Place of Business 2199 CARTER BRAXTON RD ORANGE PARK, FL 32073		Mailing Address 2 199 CARTER BRAXTON RD ORANGE PARK, FL 32073		***	1 (22)(20)	SECRETAR FALLAHASS	Y OF STA 短E, FLOR	TE IDA	 	
	lace of Business Carter Braxton Rd.	3. Mailing Address 2198 Carter	. Mailing Address 2198 Carter Braxton Rd							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			05032006	Chg-P	CR2E03	34 (11/05)		
City & Stat	e Park, FL	City & State Orange Park, FL			4. FEI Number Applied For 56-2464973 Not Applicable					
Zip	Country		Country		i i		dit.	8.75 Add		
32073	USA	32073	USA		5. Certificate	of Status Desired		ee Require		
	6. Name and Address of Current F			7. Name and	Address of Nev	v Registered A	gent			
NEWMAN, RICHARD C				Name						
2198 CARTER BRAXTON RD				Street Address (P.O. Box Number is Not Acceptable)						
ORANGE PARK, FL 32073			<u> </u>							
						nur .				
							FL	Zip Cod	е	
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										
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	OFFICERS AND (DIRECTORS	11.		ADDITIONS.	CHANGES TO C	FFICERS AND	DIRECTOR	S IN 11	
TITLE	PRES	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	NEWMAN, RICHARD C		NAME							
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		600075969136 06/08/0601004008 **61.25					
TITLE	VP	☑ Delete	TITLE	+	06/08/	<u>Ub==U1UU4</u>	UU8 *	<u>*61.25</u> □ Change	Addition	
NAME	MCCLINTOCK, DANIEL P	TA DEIGG	NAME					☐ Orange	☐ Addition	
STREET ADDRESS	2199 CARTER BRAXTON RD		STREET ADDRESS							
CITY-ST-ZIP	ORANGE PARK, FL 32073		CITY-ST-ZIP	1						
TITLE	,	☐ Delete	TITLE	VP				☐ Change	Addition	
NAME STREET ADDRESS	₩		NAME Street address			nnie U. r Braxt	an Basi	1		
CITY-ST-ZIP	1 (RIGIL)		CITY-ST-ZIP	1217		k, FI		<u>[</u>		
TITLE	Ψ	☐ Delete	TITLE		***		-1. <u>-1111111111. </u>	☐ Change	Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
TITLE		□ Delete	TITLE	 				Change	Addition	
NAME			NAME					: :		
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP		<u></u>	CITY-ST-ZIP							
TITLE NAME		☐ Delete	TITLE NAME					☐ Change	Addition Addition	
STREET ADDRESS			STREET ADDRESS							
CHTY-ST-ZIP			CITY-ST-ZIP							

2. 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.

Richard C Newman President

Date

Daytime Phone #