

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029346

Entity Name: RLC AND SON, INCORPORATED

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

2230 RIVER PINE
FORT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

2230 RIVER PINE
FORT MYERS, FL 33905

New Mailing Address:

FEI Number: 20-4215601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COCHRANE, RICHARD L JR.
2230 RIVER PINE DRIVE
FORT MYERS, FL 33905 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COCHRANE, RICHARD L JR.
Address: P.O. BOX 4580
City-St-Zip: NORTH FORT MYERS, FL 33918

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COCHRANE, RICHARD L JR.
Address: 2230 RIVER PINE DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: VP () Change (X) Addition
Name: COCHRANE, LISA K
Address: 2230 RIVER PINE DRIVE
City-St-Zip: FORT MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LISA K. COCHRANE

VP

04/25/2006

Electronic Signature of Signing Officer or Director

Date