

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155966

Entity Name: RN3, INC.

FILED
Sep 11, 2006
Secretary of State

Current Principal Place of Business:

1499 FOREST HILL BLVD
#109
WEST PALM BEACH, FL 33406 US

Current Mailing Address:

1499 FOREST HILL BLVD
#109
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

7513 PLEASANT DR
HAINES CITY, FL 33844 US

New Mailing Address:

7513 PLEASANT DR
HAINES CITY, FL 33844 US

FEI Number: 20-5517749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CAROL MAY
7513 PLEASANT DR
HAINES CITY, FL 33844 US

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: CAROL MAY

09/11/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NOLL, LISA A
Address: 1499 FOREST HILL BLVD, #109
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: D (X) Delete
Name: LEE, DEBRA
Address: 1499 FOREST HILL BLVD, #109
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: D (X) Delete
Name: MADIGAN, MURPHY
Address: 1499 FOREST HILL BLVD, #109
City-St-Zip: WEST PALM BEACH, FL 33406 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MAY, CAROL N
Address: 7513 PLEASANT DR
City-St-Zip: HAINES CITY, FL 33844 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CAROL MAY

D

09/11/2006

Electronic Signature of Signing Officer or Director

Date