

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90071 020 ***158.75

DOCUMENT # P06000066848

1. Entity Name
RC PLAZA OF FLAGLER COUNTY, INC.



40024507



01042007 Chg-P CR2E034 (12/06)

4. FEI Number
02-0777810

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

Principal Place of Business
107 BARRIER ISLE DRIVE
ORMOND BEACH, FL 32176

Mailing Address
107 BARRIER ISLE DRIVE
ORMOND BEACH, FL 32176

2. Principal Place of Business - No P.O. Box #
1530 Crowne Ormond Ln.

3. Mailing Address
1530 Crowne Ormond Ln.

Suite, Apt. #, etc.
Apt. # 516

Suite, Apt. #, etc.
Apt. # 516

City & State
Ormond Beach, FL

City & State
Ormond Beach, FL

Zip
32174

Country
USA

Zip
32174

Country
USA

6. Name and Address of Current Registered Agent

KNIGHT, JERRY C
4721 E. MOODY BLVD. VE
BLDG. #5, SUITE 505 & 506
BUNNELL, FL 32110

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
PD
COGSWELL, RICHARD
107 BARRIER ISLE DRIVE
ORMOND BEACH, FL 32176 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
PIERCE, KAREN J
107 BARRIER ISLE DRIVE
ORMOND BEACH, FL 32176 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Add
1530 Crowne Ormond Ln. #516
Ormond Beach, FL 32174

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Add
1530 Crowne Ormond Ln. #516
Ormond Beach, FL 32174

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

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

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

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

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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Karen Pierce

2/22/07