

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 27, 2007 8:00 am
Secretary of State

08-27-2007 90033 039 ***150.00

DOCUMENT # P06000108491

1. Entity Name
RCORP, INC



Principal Place of Business
646 A EYSTER ST
ROCKLEDGE FL 32955

Mailing Address
PO BOX 5708
TITUSVILLE FL 32783



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. DE Number

383740151

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, DIANE G
6745 CEDAR ST
COCOA FL 32927

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
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be**
Trust Fund Contribution. ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	PRES MOORE, DIANE G 6745 CEDAR ST COCOA FL 32927	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	VP MOORE, JAMES A JR 6745 CEDAR ST COCOA FL 32927	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	TRES MOORE, DIANE G 6745 CEDAR ST COCOA FL 32927	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	SEC MOORE, JAMES A JR 6745 CEDAR ST COCOA FL 32927	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

Diane Moore

Rs. President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RCORP INC.

P.O. Box 5708
Titusville, Florida 32783
Phone: (321)633-5556
Fax (321) 639-1225

ATTACHMENT

40130362
#P06080108491

August 20, 2007

To whom it may concern,

Recently I realized that Rcorp, Inc did not receive the annual report and therefore I requested a duplicate. Since we are a very small company, and every cent counts for us to stay in business, I would sincerely appreciate waiving the penalty fee of \$400.00.

Sincerely,



Diane G Moore
President