

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000099808

Entity Name: R & F DELIVERY, INC.

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

906 CAPE COD CIRCLE  
VALRICO, FL 335944387

**New Principal Place of Business:**

906 CAPE COD CIRCLE  
VALRICO, FL 33594

**Current Mailing Address:**

906 CAPE COD CIRCLE  
VALRICO, FL 335944387

**New Mailing Address:**

906 CAPE COD CIRCLE  
VALRICO, FL 33594

FEI Number: 27-4023996

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ARENA, KEN  
912 LITHIA PINECREST RD  
BRANDON, FL 335116121 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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: NORRIS, RICHARD A  
Address: 906 CAPE COD CIRCLE  
City-St-Zip: VALRICO, FL 335944387

Title: VTD  
Name: NORRIS, FLORENCIA L  
Address: 906 CAPE COD CIRCLE  
City-St-Zip: VALRICO, FL 335944387

I hereby 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 all other like empowered.

SIGNATURE: FLORENCIA NORRIS

VP

01/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date