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FILED

May 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P23138

(1)

1. Corporation Name  
FLORIDA RS, INC.

Principal Place of Business

6400 CONGRESS AVE  
SUITE 2000  
BOCA RATON FL 33487

Mailing Address

6400 CONGRESS AVE  
SUITE 2000  
BOCA RATON FL 33487-2810

3. Date Incorporated or Qualified  
02/24/1989

3a. Date of Last Report  
04/25/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

4. FEI Number

65-0098717

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes ☒ No ☐

9. Name and Address of Current Registered Agent

FISH, DEBORAH L.  
6400 CONGRESS AVENUE, SUITE 2000  
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE AS ☐ DELETE

NAME FISH, DEBORAH L.  
STREET ADDRESS 6400 CONGRESS AVE.  
CITY-ST-ZIP BOCA RATON FL

TITLE V ☒ DELETE

NAME SMILES, CHRISTOPHER  
STREET ADDRESS 6400 CONGRESS AVENUE  
CITY-ST-ZIP BOCA RATON FL

TITLE P ☐ DELETE

NAME HEFLEY, MIKE  
STREET ADDRESS 6400 CONGRESS  
CITY-ST-ZIP BOCA RATON FL

TITLE DV ☐ DELETE

NAME TERWILLIGER, J. RONALD  
STREET ADDRESS 2859 PACES FERRY RD  
CITY-ST-ZIP ATLANTA GA

TITLE VSTD ☐ DELETE

NAME PACE, RANDY J  
STREET ADDRESS 717 N. HARWOOD  
CITY-ST-ZIP DALLAS TX

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change ☐ Addition ☒

Wheeler, Chris  
6400 Congress Ave  
Boca Raton, FL 33487

Change ☒ Addition ☐

Change ☒ Addition ☐

Change ☐ Addition ☐

Change ☐ Addition ☒

Bryant, Brad  
6400 Congress Ave  
Boca Raton, FL 33487

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/97

Date

561 1997-9700

Daytime Phone

CR2E034 (9/96)