**FILED** 

<b>2001 UNIFORM BUSINESS</b>	REPORT	(UBR)
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## Feb 02, 2001 8:00 am Secretary of State DOCUMENT # P93000011670 1. Entity Name RPA FINANCIAL CORPORATION 02-02-2001 90282 049 \*\*\*158.75 Principal Place of Business Mailing Address 4161 NW 5 STREET P. O. BOX 5347 **PLANTATION FL 33317** FORT LAUDERDALE FL 33310 100402 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc City & State City & State 4. FEI Number Applied For 65-0395776 - Lauderda le Not Applicable Zip ... \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILNE, SAMUEL A 4161 N.W. 5TH STREET PLANTATION FL 33317 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 SIGNATURE Signatu ed or printed name o FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PD TITLE TITLE Change Delete Michael H. Braun RAYMOND, RONALD A NAME NAME 4161 NW 5 2107 S ANDREWS AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP Plantation ☐ Change Addition TITLE ☐ Delete TITLE Michele V. Laws NAME NAME 416 NWS STreet STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F Change Addition Joseph A. Epotein NAME NAME AIR! NOS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP entetion, Fi ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS Plantation, FL 3331 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change **Addition** TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **Add** TITLE TITLE ☐ Change Addition ROBER E MCNAlly 4161 NWS Street NAME NAME STREET ADDRESS STREET ADDRESS GIAN THATION CITY-ST-ZIP Y (A) 19-10 Y (A)

indicated on this report or supplemental report is tree 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 thuster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF