FILED Apr 05, 1999 8:00 am Secretary of State

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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000049440

1. Corporation Name

Principal Place of Business

R G S REALTY CORPORATION

2922 CARDINAL DR SUITE A2 VERO BEACH FL 32963 US 2. Principal Place of Business		2922 CARDINAL DR SUITE A2 VERO BEACH FL 32960 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/08/1993 4. FEI Number Applied For 59-3 19 1434 Not Applicable			
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	Additional
City & State	· •	City & State			6. Election Campaign Financing Trust Fund Contribution	- \$5.00 Added t	
Zip 24	Country 25	Zip 29 30	Country		This corporation owes the current year Int Personal Property Tax.	Yes	× 40
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
	aub, Richrd G Sr Cardinal Dr		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
SUIT	E A2		83				
VER	D BEACH FL 32963		84	City	FL	85 Zip	Code
office or re agent. I ar SIGNATURE	og the provisions of security or so og gistered agent, or both, in the State in familiar with, and accept the obliga Signature, typed or printed name of registered ager	of Florida. Such change was auth- tions of, Section 607.0505, Florida	onzed by Statutes	tne corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appointment of the purpose	ntment as re	gistered
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	ORS IN 12
TITLE	PD	☐ DELETE	1,1 TITLE			Change	☐ Addition
NAME	SCHAUB, RICHARD G SR.		1.2 NAME				
STREET ADDRESS	5601 N A1A, 200N		1.3 STREET	ADDRESS	•		
CiTY-ST-ZIP	VERO BEACH FL 32963		1.4 CITY-S	T-ZIP			
TITLE			2.1 TITLE			Change	Addition
NAME	SCHAUB, MARY B	i	2.2 NAME				
STREET ADDRESS	5601 N A1A, 200N	į	2.3 STREET	ADDRESS			
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-5	T-ZIP			□ A Jale:
ΠLE		☐ DELETE	3.1 TITLE			Change .	☐ Addition
NAME	•	·	3.2 NAME				
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP		☐ DELETE	3.4. CITY - S 4.1 TITLE	1-ZIP		Change	Addition
TITLE		C Detrit	4.1 IIILE 4. 2 NAME		•	J-	
NAME STREET ADDRESS			4.3 STREE	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				
TITLE		☐ DELETE	5.1 TITLE	-		Change	Addition
NAME			5.2 NAME	ĺ			
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ADDRESS			•

CITY-ST-ZIP 14. I 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 suppliemental 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 chapter 6, or on an attachment with appendices, with all other like empowered.

6.4 CITY-ST-ZiP

SIGNATURE:

Daytime Phone #