

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 AM 7:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000057940 (7)

1. Corporation Name

ROCKWELL INVESTMENT MANAGEMENT, INC.

Principal Place of Business

13451 MCGREGOR BLVD
STE 32
FT MYERS FL 33919
US

Mailing Address

13451 MCGREGOR BLVD
SUITE 32
FT MYERS FL 33919
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/16/1993

3a. Date of Last Report

06/14/1994

4. FEI Number

59-3208936

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

ROCKWELL, ROBERT W
7380 SAND LAKE RD.
SUITE 500
ORLANDO FL 32819

10. Name and Address of New Registered Agent

81. Name

Rockwell, Robert W.

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

13451 McGregor Blvd

83.

STE 32

84. City

Pt. Myers

FL

85.

Zip Code

33919

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 consenting)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ROCKWELL, ROBERT W
STREET ADDRESS 13451 MCGREGOR BLVD STE 32
CITY- ST- ZIP FT MYERS FL

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Robert W. Rockwell
ROBERT W. ROCKWELL

4-21-95

813-481-3737

Date

Daytime Phone #