

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 06 1997 8:00am
Secretary of State

DOCUMENT # P93000061318 (0)

1. Corporation Name
RLS, INC.



Principal Place of Business
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259

Mailing Address
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259-2104

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

08/25/1993

3a. Date of Last Report

04/03/1996

4. FEI Number

59-3269666

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

SMITH, R. LEE
1275 COUNTY ROAD 210 WEST
JACKSONVILLE FL 32259

10. Name and Address of New Registered Agent

81 Name DAVID SHIELDS
82 Street Address (P.O. Box Number is Not Acceptable)
1275 CR 210 W.
83
84 City Jacksonville FL 85 Zip Code 32259

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

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

David Shields
(NOTE: Registered Agent signature required when re-stating)

4/16/97
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SMITH, R. LEE
STREET ADDRESS 1275 COUNTY ROAD 210 WEST
CITY-ST-ZIP JACKSONVILLE FL 32259

TITLE
NAME
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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ID
1.2 NAME DAVID R Shields
1.3 STREET ADDRESS 1275 CR 210 W
1.4 CITY-ST-ZIP JACKSONVILLE FL 32259

2.1 TITLE Vice President ID
2.2 NAME Edward Smith
2.3 STREET ADDRESS 1275 CR 210 W
2.4 CITY-ST-ZIP JACKSONVILLE, FL 32259

3.1 TITLE Secretary
3.2 NAME Janet Wright
3.3 STREET ADDRESS 1275 CR 210 W
3.4 CITY-ST-ZIP JACKSONVILLE, FL 32259

4.1 TITLE Director
4.2 NAME DONNIE FRECHETTE
4.3 STREET ADDRESS 1275 CR 210 W
4.4 CITY-ST-ZIP JACKSONVILLE, FL 32259

5.1 TITLE Director
5.2 NAME Steve Canall
5.3 STREET ADDRESS 1275 CR 210 W
5.4 CITY-ST-ZIP JACKSONVILLE, FL 32259

6.1 TITLE Director
6.2 NAME KEVIN BUSH
6.3 STREET ADDRESS 1275 CR 210 W
6.4 CITY-ST-ZIP JACKSONVILLE, FL 32259

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 *David Shields* 4/16/97 904 919 1819

CR2ED034 (9/96)