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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000064853 (3)

RKR MANAGEMENT, INC.

Principal Place of Business

Mailing Address

FILED May 07 1997 8:00am Secretary of State



3821 RIDGEWO PORT ORANGE		3821 RIDGEWOOD AVE PORT ORANGE FL 32119-3526								
						3. Date Incorporated or Qualified 09/17/1993		ite of La	ist Report	
	Place of Businoss	2a. Mailing Address			4. FEI Number			Applied F	or	
21		26			59-3199874			Not Applie	cable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Stat		City & State	28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip [29]	30 Coun	ntry		8. This corporation has leability for intangible tax onder s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent		الدة	- 	10. Name and Address of New Re	gistered /	igent		
	D, ROBERT C			B1	Name					
	I RIDGEWOOD AVE IT ORANGE FL 32119		L			dress (P.O. Box Number is Not Acceptab	le)			
				В3						,
			1	84	City	, <u>, , , , , , , , , , , , , , , , , , </u>	FL	85	Zip Code	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblic	e of Florida. Such change was	authorized	by	the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of	changii ointrnen	ng its regist It as registe	tered red
SIGNATURE										
12.	Signature, typed or printed name of regulered as	cot and late if applicable (NC VD DIRECTORS	11 fingistered .	Αριι	nt signature requ	uired wher romstaling) ADDITIONS/CHANGES TO OFFICE	DATE CDS AND	DIDEC	TODE IN 15	
TITLE	PTD	DELETE	1.1 101	f		ADDITIONO/OTANGEO TO OTTIO	LINO AINE	Char		
NAME	RAND, ROBERT C		1.2 NAN	ИŁ				_		
STREET ADDRESS	3821 RIDGEWOOD AVE		1.3 STR	E (1 .	ADDRESS					
CITY-ST-ZIP	PORT ORANGE FL 32119		1.4 0(1)	y - S1	7 - ZIP					ļ
TITLE	VSD	DEFELE	2.1 1111					Char	ige [] Ad	ddilion
NAME	RAND, KELLY P		2.2 NAM							
STREET ADDRESS			2.3 STH	2.3 STHEET AUDRESS						
CITY-ST-ZIP	PORT ORANGE FL 32119				31-7/2				·····	
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NAME Street address			4. 2 NAI		ADDRESS					ł
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NAME				2 NAME					۰۰۰ کے	
STREET ADDRESS			1		ADDRESS					- 1
CITY-ST-ZIP			5.4 CITY							
TITLE		DELETE						Char	nge [] Ad	ddition
NAME			6.2 NAN	ΑE						
STREET ADDRESS			63 STR	EET.	ADDRESS					
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I do nereby 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 entire 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 1) if changed, or on all attachment with an address.

CICNATURES

Robert C. F.

4/20/67

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