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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P93000067964 (5)**

1. Corporation Name

RCM MANAGEMENT COMPANY, INC.

Principal Place of Business

1024 PINE RIDGE RD
NAPLES FL 33940
US

Mailing Address

1500 S.W. 20TH ST.
BOCA RATON FL 33486

3. Date Incorporated or Qualified: **09/23/1993**

3a. Date of Last Report: **03/14/1995**

2. Principal Place of Business

21 1500 S.W. 20th St.

Suite, Apt. #, etc. 22

City & State 23 Boca Raton Fl

Zip 24 33486 Country 25 US

2a. Mailing Address 26

Suite, Apt. #, etc. 27

City & State 28

Zip 29 Country 30

4. FEI Number: **65-0458780** 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

MEYER, ROBERT C
1500 S.W. 20TH ST.
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 name change DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MEYER, ROBERT C.	1.2 NAME	
STREET ADDRESS	1500 SOUTHWEST 20TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	VSD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MEYER, MARCIANA W.	2.2 NAME	
STREET ADDRESS	1500 SOUTHWEST 20TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MEYER, C. R.	3.2 NAME	
STREET ADDRESS	146 DAN RIVER COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (12/95)

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 119.07(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 C. MEYER 1/19/96 407 368 9216

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #