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FILED

May 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000074520 (6)

1. Corporation Name:
RRC GENERAL SPC, INC.

Principal Place of Business
200 LAURA STREET
JACKSONVILLE FL 32202

Mailing Address
200 LAURA STREET
JACKSONVILLE FL 32202-3500



3. Date Incorporated or Qualified
10/27/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
59-3207768

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

2. Principal Place of Business

21 121 W. Forsyth St

22 Suite 200

23 Jacksonville, FL

24 32202 25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

F&L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STEIN, MARTIN E JR
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME
JOHNSON, BRUCE M
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME
THOMPSON, JAMES D
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME
SKINNER, A. CHESTER 111
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME
MILLER, ROBERT L JR
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME
LEAVITT, CHRISTAIN J
STREET ADDRESS
121 W. FORSYTH ST. STE. 200
CITY-ST-ZIP
JACKSONVILLE FL 32202

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 ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 in an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/97

904 356 7000

Date

Daytime Phone

CR2E034 (9/96)