

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

FILED
Jun 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000084216 (9)

1. Corporation Name

RT&D HOLDINGS, INC.

Principal Place of Business

Mailing Address

800 BYPASS DRIVE
STE. 215
CLEARWATER FL 34624

1253 PARK STREET
CLEARWATER FL 34616

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/09/1993

2. Principal Place of Business

2a. Mailing Address

21 1208 S MYRTLE AVE

25

4. FEI Number

59-3213368

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

CLEARWATER, FL

27

Zip

Country

Zip

Country

24 33756

25

28

30

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARD, R. CARLTON
1253 PARK ST.
CLEARWATER FL 34616

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 the filer (add date)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	BYRD, ROBERT	1.2 NAME	
STREET ADDRESS	1208 S MYRTLE AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 34616	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	
NAME	RYAN, JOHN M	2.2 NAME	
STREET ADDRESS	69 JOHN ST. S	2.3 STREET ADDRESS	
CITY-ST-ZIP	HAMILTON ON S8N-2B9	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	
NAME	RYAN, JOHN M	3.2 NAME	
STREET ADDRESS	69 JOHN ST. S	3.3 STREET ADDRESS	
CITY-ST-ZIP	HAMILTON ON S8N-2B9	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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***\$550.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 EC7, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.