

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 11:12

DOCUMENT # P94000007257 (6)

1. Corporation Name

R C G LEASING, INC.

Principal Place of Business

1416 FOREST AVE
NEPTUNE BEACH FL 32266

Mailing Address

1416 FOREST AVE
NEPTUNE BEACH FL 32266

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/20/1994

3a. Date of Last Report

2. Principal Place of Business

21 2219 Meadowmouse

2a. Mailing Address

26 2219 Meadowmouse

4. FEI Number

59-3218555

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Orlando, Florida

City & State

28 Orlando, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

24 32837 25 Orange

Zip

Country

29 32837 30 Orange

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BERNREUTER, CHARLES H III
1416 FOREST AVE
NEPTUNE BEACH FL 32266

10. Name and Address of New Registered Agent

81 Name

Darrin Zaleski

82 Street Address (P.O. Box Numbers Not Acceptable)

2219 Meadowmouse St.

83

84 City

Orlando

FL

85 Zip Code

32837

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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.1505, Florida Statutes.

SIGNATURE

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

(If Off. Registered Agent signature required when necessary)

DATE

12. OFFICERS AND DIRECTORS

TITLE RD
NAME SCHANTZ, ROB
STREET ADDRESS 2663 TREASURE COVE LANE
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE D
NAME SCHANTZ, MRS.
STREET ADDRESS 2663 TREASURE COVE LANE
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE RD
NAME ELLIS, GARY
STREET ADDRESS 4344 TIDEVIEW LANE
CITY-ST-ZIP JACKSONVILLE FL 32250

TITLE STD
NAME BERNREUTER, CHARLES H III
STREET ADDRESS 1416 FOREST AVE
CITY-ST-ZIP NEPTUNE BEACH FL 32266

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE President ☒ Change ☐ Addition
2. NAME Gary W. Ellis
3. STREET ADDRESS 4344 Tideview Lane
4. CITY-ST-ZIP Jacksonville, FL 32250

2. TITLE VST
2. NAME Darrin Zaleski ☐ Change ☒ Addition
3. STREET ADDRESS 2219 Meadowmouse St.
4. CITY-ST-ZIP Orlando, FL 32837

3. TITLE D ☐ Change ☒ Addition
3. NAME Laura Wagner-Zaleski
4. STREET ADDRESS 2219 Meadowmouse St.
5. CITY-ST-ZIP Orlando, FL 32837

4. TITLE ☐ Change ☐ Addition

5. TITLE ☐ Change ☐ Addition

6. NAME ☐ Change ☐ Addition

7. STREET ADDRESS ☐ Change ☐ Addition

8. CITY-ST-ZIP ☐ Change ☐ Addition

9. TITLE ☐ Change ☐ Addition

10. NAME ☐ Change ☐ Addition

11. STREET ADDRESS ☐ Change ☐ Addition

12. CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and accurate, not payable for the exemption stated in Section 199.03(6)(b), 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 recorder or officer 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 no address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/95

407/856-8125