

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED

95 AUG -7 AM 11:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P94000015982 (9)

1. Corporation Name

RIISE GROUP I, INC.

Principal Place of Business

201 SOUTH ORANGE AVENUE
SUITE 1060, SIGNATURE PLAZA
ORLANDO FL 32801

Mailing Address

201 SOUTH ORANGE AVENUE
SUITE 1060, SIGNATURE PLAZA
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/01/1994

3a. Date of Last Report

4. FEI Number

☒ Applied For

☐ Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

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

WILSON, JEAN E
201 SOUTH ORANGE AVENUE
SUITE 1060, SIGNATURE PLAZA
ORLANDO FL 32801

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	CLAY, LAREATHA H	809 E. AMELIA STREET	ORLANDO FL 32803
D	BROWN-HARRIS, ANN	5185 NEPONSET AVENUE	ORLANDO FL 32808
D	LEE, ARTHUR J	5409 SAGO PALM COURT	ORLANDO FL 32819
D	MATTHEWS, IRVING J	351 PLAZA DRIVE	EUSTIS FL 32728
D	SPIVEY, WILLIAM F	205 E. CENTRAL BLVD., SUITE 601	ORLANDO FL 32801
D	WILSON, JEAN E	5207 RAZORBACK COURT	ORLANDO FL 32819

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. Change	6. Addition
No longer a Director				☒	☐
No longer a Director				☒	☐
D/P,				☐	☒
D/V/P/T				☐	☒
No longer a Director				☒	☐
D/S				☐	☒

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 110.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-13-95

407/426-7545