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

Mar 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P94000041526 (2) R.F.W. OF ORLANDO INCORPORATED Principal Place of Business Mailing Address 696 VENTURE COURT WINTER SPRINGS FL 32708 696 VENTURE COURT WINTER SPRINGS FL 32708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/31/1994 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3247921 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required City & State \$5.00 May Be 8. Election Campaign Financing **Trust Fund Contribution** Added to Fees 23 28 8. This corporation owes or has paid the current year Intangible US A Yes 24 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name webster, richard e 696 VENTURE COURT 82 Street Addr WINTER SPRINGS FL 32708 83 84 City 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 heleby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. E. WEBSTES Paeraeut SIGNATURE TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES DELETE TITLE Change Addition WEBSTER WEBSTER, RICHARD E NAME 1.2 NAME 696 VENTURE COURT STREET ADDRESS 1.3 STREET ADDRESS WINTER SPRINGS FL CITY - ST - 7IP 14 City-St-7iP DELETE TITLE dsvt 2.1 TITLE WEBSTER, FRANCES 2.2 NAME 696 VENTURE CT STREET ADDRESS 2.3 STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3 1 TITLE TITLE 3 2 NAME MASSE 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP Addition DELETE ☐ Change TIFLE 5.1 TITLE 5 2 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. Thereby 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 eath; 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

CITY-ST-ZIP

officer or director of the co Block 12 or Block 13 if cla

SIGNATURE:

FILED