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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000041526

1. Corporation Name

R.F.W. OF ORLANDO INCORPORATED

Principal Place of Business

1008 NODDING PINES WY
CASSELBERRY FL 32707
US

Mailing Address

1008 NODDING PINES WY
CASSELBERRY FL 32707
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1994

4. FEI Number

59-3247921

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 **5542 Ligustrum Loop**

26 **5542 Ligustrum Loop**

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

23 **Oviedo, FL**

City & State

28 **Oviedo, FLA**

Zip

24 **32765**

Country

25 **Seminole**

Zip

29 **32765**

Country

30 **Seminole**

9. Name and Address of Current Registered Agent

WEBSTER, RICHARD E
1008 NODDING PINES WY
CASSELBERRY FL 32707

10. Name and Address of New Registered Agent

81 Name **Richard E. Webster**

82 Street Address (P.O. Box Number is Not Acceptable)

5542 Ligustrum Loop

83

84 City

Oviedo

FL

85 Zip Code

32765

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

Richard E. Webster

Richard E. Webster

DATE

4/1/99

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE
NAME **WESBTER, RICHARD E**
STREET ADDRESS **1008 NODDING PINES WY**
CITY-ST-ZIP **CASSELBERRY FL 32707**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **DP** ☒ Change ☐ Addition
12 NAME **WEBSTER, RICHARD E**
13 STREET ADDRESS **5542 Ligustrum Loop**
14 CITY-ST-ZIP **Oviedo, Florida 32765**

21 TITLE **VP/TREASURER** ☐ Change ☒ Addition
22 NAME **MARY ANN CABRAL**
23 STREET ADDRESS **1008 NODDING PINES WY**
24 CITY-ST-ZIP **Casselberry Florida 32707**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I 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 on an attachment with an address, with all other like empowered

SIGNATURE:

Richard E. Webster

Richard E. Webster

Date

Daytime Phone #

CR2E034 (11/98)