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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000042716 (8)

R & C DEVELOPMENT, INC.

FILED Apr 15 1997 8:00am Secretary of State



Principal Plan										
Principal Place of Business		Mailing Address				-{	i	•, .,		
48851 EMERALD COAST PARKWAY DESTIN FL 32541			48951 EMERALD COAST PARKWAY DESTIN FL 32541							
							3. Date Incorporated or Qualified 06/03/1994	3a. Date of L 03/18/19		eport
2. Principal Place of Business			2a. Mailing Address							plied For
17714 W EMERALO COAST PKI			Suite, Apt. #, etc.			- PRKUY				1 Applicable
Sulte, Apt.	. #, etc.		Suite, Apt. #, etc				5. Certificate of Status Desired			Additional equired
City & State			City & State				6. Election Campaign Financing	May Be		
BEST	<u>'NN</u>	FL	28 DESTIN	FL_			Trust Fund Contribution	Ac	ded t	lo Fees
ا Zip		Country	Zip		Country		8. This corporation has liability for	intangible tax un	der s.	199.032,
325		25 Walton	29 3254/	30	NAUT	TON		Yes No		
		and Address of Curre	ent Hegistered Agent		81	Name	10. Name and Address of New Re	gistered Agent		
	EWS, TERR			Į		bi Name				
46951 EMERALD COAST PARKWAY DESTIN FL 32541			r			82 Street Address (P.O. Box Number is Not Acceptable) 83				
					84	City		85	Zip (Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, F office or registered agent, or both, in the State of Florida. Such a agent. I am familiar with, and accopt the obligations of, Section				Values the			protion pulposite this protocopy for the		in n. 14	o rocintorod
office or i	registered a	gent, or both, in the Stat	te of Florida. Such change	was author	ized by t	he corporati	ion's board of directors. I hereby accept	pt the appointme	nt as	registered
agent. I a	am familiar w	rith, and accept the obli	gations of, Section 607.050	5, Florida S	Statutes.					
SIGNATURE	Claneture type	of or printed page of too throad a	ony and tile if employable	(NOIL Paris	loved Apopl	Piggalue Paguire	ed whon reinstaline)	DATE		
	Signature, type	d or printed name of registered a				signature require	ed when reinstating) ADD/TIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	CTOR	S IN 12
SIGNATURE 12. TITLE	Signature, type		gent and title if applicable. ND DIRECTORS DELET	1	stered Agent 13.	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE			S IN 12
12.	P	OFFICERS AI	ND DIRECTORS	1	3.	signature require		CERS AND DIREC		
12. TITLE	P CREWS,		ND DIRECTORS DELET	1 1	1 TITLE		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC		
12. TITLE NAME	P CREWS,	OFFICERS AI TERRY L RYSTAL COVE LANE	ND DIRECTORS DELET	1 1 1	1 TITLE 2 NAME		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC		
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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 or 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.