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

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

P94000072009 (1)

RUGBY CONCORD MANAGEMENT, INC.

Principal Place 200 RUGBY I W PALM BEA		Mailing Address  200 RUGBY RD W PALM BEACH FL 33405							
						3. Date Incorporated or Qualified 09/27/1994	3a. Date 6		st Report <b>1995</b>
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number 65-0524382		Ì	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	FIRE LINE AND CHARLES AND A			5. Certificate of Status Desired	[]	-	.75 Additional ee Required
City & State	е	City & State		_		Election Campaign Financing     Trust Fund Contribution	[]		5.00 May Be dded to Fees
Zip 24	Country Zip C 25 29 30			у		8. This corporation has liability for intangible tax under s 199.032, Florida Stalutes ☐ Yes ☐ No			
	9. Name and Address of Curre	nt Registered Agent		т.		10. Name and Address of New F	Registered A	gent	
			81	'	Name				
GARY, T			82 Street A		Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
200 RUC W Palm	BEACH FL 33405		83	3					
			84	1	City		FL	85	Zip Code
or register familiar wi SIGNATURE	red agent, or both, in the State of Flor th, and accept the obligations of, Sec Signature, typed or infelled name of registered agen	rida. Such change was authori ction 607.0505, Florida Statute nrand litte if applicable N	zed by the corps.  Oit: Registered Apr.	po	ration's boar	*******	DATE	ogisti 	ered agent. I am
12.	PD OFFICERS AF	ND DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFF			
TITLE	• =	CTEDUCAL LI					L	Char	nge 🔲 Addition
NAME	HERSCH, STEPHEN H. 7596 MOUNTAIN PARK		1.2 NAME						
STHEET ADDRESS	CONCORD OH		1.3 STREET ADDRESS 1.4 CITY+ST-ZIP						
CITY-ST-ZIP TITLE	MD DELETE				- ZIP			Char	nge 🗍 Addition
NAME	GARY, T. JACK III	<u> </u>	2 1 TITLE 2 2 NAME					D-141	age
STREET ADDRESS	200 RUGBY RD		2.3 STREET ADDRESS		ADDRESS				
C-TY-ST-ZIP	WEST PALM BEACH FL		2.4 City-ST-ZiP						
TITLE		DELETE	3 1 THILE					Char	nge 🔲 Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	ET A	ADDRESS				
CITY-ST-ZIP			34 CIFY -	_	- ZiP				
THE	☐ DELLETE		4 1 TITLE	İ			LJ	Char	nge 🔲 Addition
NAME			4.2 NAME		•				
STREET ADDRESS			4 3 STREE						
CITY-S1-ZIP TITLE		DELETE	4.4 CITY-: 5.1 TITLE	_	- ZIP		<del>-</del>	Char	nge Addition
NAME			5 2 NAME		1		LJ	Onto	igo [] Mosition
STREET ADDRESS			5 3 STREE		nnesee				
CITY-ST-ZIP			5.4 C(TY-						
TITLE		DELETE	6 1 1 ITLE		.::			Char	ige Addition
NAME			6.2 NAME						<del>_</del>
STREET ADDRESS			6.3 STREE		ADDRESS				
CITY-ST-ZIP			6.4 CITY - 2						
certify that oath; that	t the information indicated on this ann	nual report or supplemental and oration or the receiver or truste	nual report is tr se empowered	ue	and accurat	or the exemption stated in Section 119, te and that my signature shall have the s report as required by Chapter 607, Fig.	same legal et	fect	as if made under

SIGNATURE: Standing and Typed on Printed have of Signing Officer or Director

3/28/96 216.250.0475 Dayting Priore