

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

FILED
Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000076692 (0)
 1. Corporation Name
RS ELMORE ENTERPRISES, INC.



Principal Place of Business 503 BONNIE BLVD. PALM HARBOR FL 34684	Mailing Address 503 BONNIE BLVD. PALM HARBOR FL 34684
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/17/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3275861	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
DIMARCO, ROBERT F
3440 EAST LAKE ROAD #104
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name Shirley A. Elmore
82 Street Address (P.O. Box Number is Not Acceptable) 503 BONNIE BLVD
83
84 City PALM HARBOR FL
85 Zip Code 34684

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. In my family name, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Shirley A. Elmore* DATE: **3/24/98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	ELMORE, ROBERT
STREET ADDRESS	19 DEWEY PLACE
CITY-ST-ZIP	PLAINVILLE CT
TITLE	D <input type="checkbox"/> DELETE
NAME	ELMORE, SHIRLEY
STREET ADDRESS	503 BONNIE BLVD.
CITY-ST-ZIP	PALM HARBOR FL 34684
TITLE	D <input type="checkbox"/> DELETE
NAME	FISCHER, STEVEN M.
STREET ADDRESS	1779-1 REUVEN CIR
CITY-ST-ZIP	NAPLES FL
TITLE	D <input type="checkbox"/> DELETE
NAME	FISCHER, JULIE A.
STREET ADDRESS	1779-1 REUVEN CIR
CITY-ST-ZIP	NAPLES FL
TITLE	D <input type="checkbox"/> DELETE
NAME	ELMORE, ROBERT RYAN
STREET ADDRESS	1209 BRUCE B. DOWNS, #1210
CITY-ST-ZIP	TAMPA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	503 BONNIE BLVD
1.3 STREET ADDRESS	PALM HARBOR FL 34684
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	58 MAY ST.
5.3 STREET ADDRESS	WORCESTER MA 01610
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 in an attachment with an address.

SIGNATURE: *Shirley A. Elmore* DATE: **3/24/98 813(786-0076)**

CF2E034 (10/97)