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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

P95000014666 (8)

RHONDY, INC.

## **FILED** Apr 23 1998 8:00am Secretary of State



904.2895275

Principal Place	e of Business		Mailing Ac	Idress			***************************************	45111 ESIGI (15)	41014 41116 41	
1004 FAY DRIVE 1004 FAY DRIVE										
MARY ESTHER FL 32569			MARY ESTHER FL 32569				DO NOT WRITE IN THIS SPACE			
US			US				3. Date Incorporated or Qualified			
							02/21/1995			
2. Principal Pl	lace of Business		2a. Mailing	Address			4. FEI Number	<del></del>	Ar	oplied For
21 312 r		Glory Lane.	26 312	, Morni	ng G	long Lane	59-3302141			ot Applicable
Sulte, Apt			Suite, A	Apt. #, etc.					\$8.75	Additional
22			27				5. Certificate of Status Desired		Fee Re	beniupe
City & State		1	City &	State		FL.	6. Election Campaign Financing		\$5.00	May Be
23 Jackson	anville.	FL	28 Jul	Ksonville	, 	·	Trust Fund Contribution		Added	to Fees
Zip		Country	Zip		Cou		8. This corporation owes or has p			
24 3225		US A	29 322:		30	LS A	Personal Property Tax due Jur  10. Name and Address of New F		·	No
		Address of Current F	legistered A	gent		81 Name		registered A	gent	
WORTHINGSTUN, RHONDA L						Kh0		un		
1004 FAY DRIVE						82 Street Ad	dress (P.O. Box Number is Not Accept MOYN I A CLONY LA	able)		]
M/	ary esther f	L 32569					morning story we	ne		
						83 Jac	Ksonville FL			
						84 City			85 Zip	Code 259
								<u>FL</u>		
11. Pursuant i	to the provisions	of Sections 607.0502 a or both, in the State of	and 607,1508 Florida, Such	, Florida Statute n chance was a	es, the at uthorized	oove-named co d by the corpor	progration submits this statement for the ration's board of directors. I hereby acc	purpose of ept the appo	changing it sintment as	ts registered registered
agent. I a	m <b>jam</b> ijiar with, a	nd accept the obligation	ons of, Sectio	n 607.0505, Flo	rida Stat	utes.	ration's board of directors. Thereby acc	4-17	100	
SIGNATURE	Khanda								-9 8 	
	Signature typed or price	nted name of registored agont a		le (NOTE		d Agent signature rec	quired when reinslating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	25 IN 12
12.	PD	OFFICERS AND I	DIRECTORS	DELETE	13.	n s	ADDITIONS/CHANGES TO OFF	ICENS AND	Change	Addition
TITLE		STUN, RHONDA L		L) Officia	1.1 N					ا ۱۱۵۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰
NAME	1004 FAY I									
STREET ADDRESS	MARY ESTI				1	REET ADDRESS				
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TITLE				_ viiii	2.2 N/					
NAME						REET ADDRESS		٠.		
STREET ADDRESS										
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STREET ADDRESS						I .				
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NAME					4. 2 N	ļ				
					1	REET ADDRESS				
STREET ADDRESS						TY-ST-ZIP				
CITY-ST-ZIP TITLE		-dr		DELETE	5.1 TI				Change	Addition
				- Perrie	5.2 N/					
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STREET ADDRESS						TY-ST-ZIP				
CITY-ST-ZIP TITLE	<del> </del>			DELETE	6.1 TI				Change	Addition
					6.2 N					
NAME AVACET ADDOCAC										
STREET ADDRESS	1					REET ADDRESS				
CITY-ST-ZIP	<u> </u>		<del></del>		6.4 C	TY-ST-ZIP			3:1 (b - 1 d)	

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. 4-17-98