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

	1990	OTTO OTT	OOM ONAM					
DOCUMENT # P95000032195 (6) 1. Corporation Name								
R & D DEVELOPMENT, INC.								
							PA HILA HERI HE	
Principal Place	of Business	Martina Add-ass						
		Mailing Address						
C/O HARTER SECREST & EMERY 800 LAUREL OAK DR SUITE 400 NAPLES FL 33963 2. Principal Place of Business								
					3. Date Incorporated or Qualified 04/21/1995	3a.	Date of Last R	
	ice of Business	2a. Mailing Address 26			4. FEI Number 65-0582556			Applied For
Suite, Apt. #	, etc.	Suite, Apt. #, etc.						Not Applicable Additional
22		27	27		5. Certificate of Status Desired			Required
City & State		City & State	h		6. Election Campaign Financing			0 May Be
23 Zip	Country 7in /		Country		Trust Fund Contribution			d to Fees
24 Zip	Country 25	Ζ _i ρ 29	Country 30		8. This corporation has liability for Florida Statutes	intangible No		199.032,
<u></u>		. Name and Address of Current Registered Agent			10. Name and Address of New I			
			81	Name			7	
	S, C. PÉRRY		82	Street Ado	lress (P.O. Box Number is Not Acceptal	ole)		
	JREL OAK DR			0110011111	1000 (Free Con Horrico In 1901 / Woodplan	лс _/		
SUITE 4			83					
NAPLES	FL 33963		84	City			. 85 Zij	o Code
44 Dureught to	the providing of Sections 60	7 0500 and 607 1500 Clarida Statuto	· #5 shows r	···· d sema	Company of the second s	F	'L `	
or registere	ad agent, or both, in the State i	ot Florida. Such change was authorize	is, the above-i ed by the corp	named corpu oration's boa	oration submits this statement for the pu ard of directors. Thereby accept the app	rpose or ointment	changing its r as registered	egistered office agent. I am
	n, and accept the bullgations of	of Florida Statutes.						_
SIGNATURE _	Signature, typed or printed name of register	red agent and title if applicable. (NOT	FE: Rog stered Agen	nt signature require	ed when reinstating)	DATE		
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS A	<u></u>	
TITLE	= ···		1. 1 TITLE				☐ Change	Addition
NAME	RUBINTON, JON		1.2 NAME					
STREET ADDRESS	7036 VERDE WAY NAPLES FL 33963		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	D NAPLES PL 33903	DELETE	1.4 CITY - ST - ZIP 2. 1 TITLE				Change	Addition
NAME	NICHAMP NAME		2. THEE				БС рнанЯо	☐ AUGIGGII
STREET ADDRESS	AR NOVEMBER OF THE PERSON	Egnat			7401 Bay Colony Drive	۵.		
CITY-ST-ZIP	NAPLES FL 33963	RRHAN	2.4 CHTY - ST - ZIP		1401 bay colony bilt.	-		
TITLE	☐ DELETE		3 1 TITLE		- VIII	·	Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3 3. STREET	ADDRESS				
CITY-ST-ZIP			34 CITY-S	T - ZIP				
TITLE	DELETE		4. 1 TITLE				☐ Change	☐ Addition
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP TITLE	·····	☐ DELETE	4.4 CITY - S 5. 1 TITLE	T-ZIP			Change	F1 Addition
NAME	1		5.1 TILLE 5.2 NAME				[_] Change	Addition
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP				I CITY - SI - ZIP]
TITLE	—		6. 1 TITLE	1.21			[] Change	Addition
NAME		_	6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - S					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementar 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 a ratiachment with an address.

SIGNATURE:

JON RUBINTON

3/15/96

(941) 566-9500

RUBINTON

Dayting Prome I