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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000032195 (6)

Country

R & D DEVELOPMENT, INC.

Principal Place of Business

26210 MIRA WAY BONITA SPRINGS FL 34134

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

Mailing Address

C/O HARTER SECREST & EMERY 800 LAUREL OAK DR SUITE 400

NAPLES FL 33963

FILED Jan 26 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

04/21/1995

65-0582556

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

4. FEI Number

24	25	13 34 135	30	US	Personal Property Tax due June 30. 🔲 res 🔲 No	ļ
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
PEEPLES, C. PERRY					•	
8889 PELICAN BAY BLVD			f	82 Street A	Address (P.O. Box Number is Not Acceptable)	\dashv
300						ل
NAPLES FL 34108				83	1	-
			ļ	84 City	85 Zip Code	\dashv
			1		 <u>FL</u> 	
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. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered age			Agent signature r	required when rainstating) DATE A DESCRIPTION OF THE PROPERTY OF THE PROPERT	_
TITLE	OFFICERS ANI	DELETE	13.	15	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	<u>, </u>
NAME	RUBINTON, JON	DLCC1C	1.2 NA		Lii Vilaigo Lii noduloi	"
STREET ADDRESS	26210 MIRA WAY			REET ADDRESS		- }
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NAME	DUCHARME, DUANE		2.2 NA			"
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CITY-ST-ZIP	NAPLES FL		1	TY-ST-ZIP		1
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NAME !			3,2 NA	ME SW		- 1
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TITLE		☐ DELETE	6.1 TiT	LE	Change Addition	រា
NAME			6,2 NA	ME		1
STREET ADDRESS			6.3 ST	REET ADDRESS		
CITY-ST-ZIP	/			Y-ST-ZIP		_
 14. I hereby of indicated 	ertify that the information supplied w on this annual report or supplementa	th this filing does not qualify I annual report is true and a	for the exe	mption stated that my sign	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an	1