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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000067624 (3)

R.A. SIMMONS, INC.

FILED Feb 17 1998 8:00am Secretary of State



Ennoipal Flace of Business				Mailing Address					
17585 MOORFIELD ROAD FT. MYERS FL 33908				17585 MOORFIELD ROAD FT. MYERS FL 33908					
FI. MIENS FL 33300				II. MIENS FL 33800				DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								08/31/1995	
2. Principal Place of Business 2a. Mailing Ad					Iress			4. FEI Number Applied For	
21			26					65-0583635 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				69 7E additional	
22				27				5. Certificate of Status Desired Fee Required	
City & State				City & State				Election Campaign Financing \$5.00 May Be	
23				28				Trust Fund Contribution Added to Fees	
— Zip	-	Country		Zip 1	\vdash	ountry	,	 This corporation owes or has paid the current year Intangible 	
24	25 29 30				30			Personal Property Tax due June 30. X Yes No	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent		
SIMMONS, RICHARD A						81	Name	Ð	
17585 MOORFIELD ROAD						82	82 Street Address (P.O. Box Number is Not Acceptable)		
FT.	MYERS FL	. 33908							
						83			
						84	City	85 Zip Code	
						"	City	FL S Zip Gode	
11. Pursuant t	o the provisio	ons of Sections	607.0802 s fd	697.1508, Florida Stat	utes, the	abov	e-namec	d corporation submits this statement for the purpose of changing its registered	
Office of re agent lar	egistered age milamihar wit	ent, of both, art beard accept t	he state of Flor	ida. Such change was af. Section 607.0505. F	s authoriza Florida Sta	ed by atule:	the cor	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	
	≻ — X	notes.	75 A				$\mathcal{D}_{\mathcal{L}}$	1.40//4 \	
SIGNATURE :	Signature	r printed name of the	islated agent and till	le if applicable (No	OTF: Register	red Age	ent signatur	re required when renstating) DATE.	
12.	ーフ	OFFIC	ERS AND DIRE	CTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			DELETE	1.1	TITLE		Change Addilion	
NAME	SIMMON	s, ri chard <i>i</i>	A		1.21	NAME			
STREET ADDRESS	RESS 17585 MOORFIELD ROAD		DAD			1.3 STREET ADDRESS			
CITY-ST-ZIP	FT. MYE	RS FL 33908			1.4	CITY-S	T-ZIP		
TITLE				☐ DELETE	21	2 1 TITLE		Change Addition	
NAME					2.21	2.2 NAME		mark Mucciarone	
STREET ADDRESS					2.3 9	STREET	ADDRESS	[
CITY-ST-ZIP					2. 4 CITY			F+ Myers, FC 33908	
TITLE				DELETE		TITLE	<u> </u>	Change Addition	
NAME		-		NAME					
STREET ADDRESS					•		ADDRESS		
CITY-ST-ZIP					1	CITY-5			
TITLE				DELETE		TITLE	71 - £11"	Change Addition	
NAME				<u> </u>	1	NAME			
STREET ADDRESS						-	ADDRESS		
CITY-ST-ZIP						DITY-S			
TITLE				DELETE	_	HTLE	1-41	Change Addition	
NAME						NAME			
STREET ADDRESS							ADDRESS		
·]									
CITY-\$1-ZIP		·····		DELETE	6.11	CITY-S	I - EIP	Change Addilion	
1				المال المال					
NAME PARTET ADDRESS						NAME	1000555		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP	actifu that the	information com	valiad with this	filing door not qualit.		CITY-S		and in Cooling 110 D7(2)(i) Florida Clatutas I further positive that the information	
indicated o	on this annua	I report or supp	zpried with this elemental annua	al report is true and ac	curate ar	onpi	at my sig	ted in Section 119.07(3)(i), Florida Statutes. I further cortify that the information gnature shall have the same legal effect as if made under oath; that I am an	
officer or d	lirector of the	corporation of	the receiver or	Mullee empowered to	execute	this t	report as	gnature shall have the same legal effect as if made under oath; that I am an s required by Chapter 607, Florida Statutes; and that my name appears in	
DIOUR IZ O	" DIOUK IO II	enanged, or oil	CO CICIO III	audiess.					