..., ...J .T .... CC URATION . .L BE   JL. ..OR AFTER AUGUST 7, 1 i.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

~~1990~~ 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 26 1997 8:00am
Secretary of State

DOCUMENT # P95000076585 (5)

1. Corporation Name

RPM TECHNICAL DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
6648 OLD CHENEY HIGHWAY #B ORLANDO FL 32807	6648 OLD CHENEY HIGHWAY #B ORLANDO FL 32807

3. Date Incorporated or Qualified	3a. Date of Last Report
10/03/1995	10/2/96

2. Principal Place of Business	2a. Mailing Address	4. FEI Number
21 6648 OLD CHENEY Hwy.	26 6648 OLD CHENEY Hwy.	59-3339370 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc.
22 Suite C   27 Suite C

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

City & State
23 Orlando, FL. 32807   28 Orlando, FLORIDA

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Zip	Country	Zip	Country
24	25 USA	29 32807	30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DETTMER, ROBERT P 6648 OLD CHENEY HIGHWAY #B ORLANDO FL 32807 ADDRESS Change Only →	81 Name Robert P. Dettmer 82 Street Address (P.O. Box Number is Not Acceptable) 302 Alemander Ave. 83 84 City Debary FL 85 Zip Code 32713

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 agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D ☐ DELETE		1.1 TITLE	☐ Change ☐ Addition
NAME DETTMER, ROBERT P		1.2 NAME	
STREET ADDRESS 302 ALEMANDER AVENUE		1.3 STREET ADDRESS	
CITY-ST-ZIP DEBARY FL 32713		1.4 CITY-ST-ZIP	
TITLE D ☐ DELETE		2.1 TITLE	☐ Change ☐ Addition
NAME POINDEXTER, DAVID A		2.2 NAME	
STREET ADDRESS 708 PATTERSON STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP STOUGHTON WI 53589		2.4 CITY-ST-ZIP	
TITLE ☐ DELETE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE ☐ DELETE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE ☐ DELETE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE ☐ DELETE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (3/96)

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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _Robert Dettmer_   2/20/97   (407)381-3013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

0014504   CP