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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P95000094824 (6)**

1. Corporation Name
RETCOR, INC.

Principal Place of Business	Mailing Address
53 SAILFISH DRIVE PONTE VEDRA BEACH FL 32082	53 SAILFISH DRIVE PONTE VEDRA BEACH FL 32082-2055

3. Date Incorporated or Qualified: **12/12/1995**
3a. Date of Last Report: **04/17/1996**

2. Principal Place of Business — 21 | 2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 | Suite, Apt. #, etc. — 27
City & State — 23 | City & State — 28
Zip — 24 | Country — 25 | Zip — 29 | Country — 30

4. FEI Number: **59-3347614** ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

GARRARD, O.J. III
6828 ST AUGUSTINE RD
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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(S) (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	☐ DELETE	1.1 TITLE: PD	☒ Change ☐ Addition
NAME: TINSLEY, SCOTT A		1.2 NAME: Curtis B. Tinsley	
STREET ADDRESS: 1230 PENMAN RD		1.3 STREET ADDRESS: 53 Sailfish Dr	
CITY-ST-ZIP: JACKSONVILLE BCH FL		1.4 CITY-ST-ZIP: Ponte Vedra Bch, Fl 32082	
TITLE: VPD	☐ DELETE	2.1 TITLE: VPD	☒ Change ☐ Addition
NAME: TINSLEY, CUTIS R		2.2 NAME: Todd Tinsley	
STREET ADDRESS: 53 SAILFISH DR		2.3 STREET ADDRESS: 11459 Mandalin Glen Circle	
CITY-ST-ZIP: PONTE VEDRA BCH FL		2.4 CITY-ST-ZIP: Jacksonville, Fl	
TITLE: VPD	☐ DELETE	3.1 TITLE: VPD	☒ Change ☐ Addition
NAME: TINSLEY, TODD A		3.2 NAME: Scott Tinsley	
STREET ADDRESS: 11459 MANDRAIN GLEN CIRCLE		3.3 STREET ADDRESS: 1230 Penmah Rd	
CITY-ST-ZIP: JACKSONMVILLE FL		3.4 CITY-ST-ZIP: Jacksonville Bch. Fl.	
TITLE: STD	☐ DELETE	4.1 TITLE: STD	☐ Change ☐ Addition
NAME: TINSLEY, ARLENE M		4.2 NAME: Arlene M Tinsley	
STREET ADDRESS: 53 SIALFISH DR		4.3 STREET ADDRESS: 53 Sailfish Dr	
CITY-ST-ZIP: PONTE VEDRA BCH FL		4.4 CITY-ST-ZIP: Ponte Vedra Bch Fl.	
TITLE: CB	☐ DELETE	5.1 TITLE: CB	☐ Change ☐ Addition
NAME: TINSLEY, RONALD E		5.2 NAME: Ronald E Tinsley	
STREET ADDRESS: 53 SAILFISH DR		5.3 STREET ADDRESS: 53 Sailfish Dr.	
CITY-ST-ZIP: PONTE VEDRA FL		5.4 CITY-ST-ZIP: Ponte Vedra Bch, Fl	
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 (9/96)

14. Effective this day, 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 a director or officer 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.

SIGNATURE: Arlene M Tinsley - ARLENE M. TINSLEY 3/7/97 904-285-4540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000150970