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

**PROFIT** CORPORATION ANNUAL REPORT

1998

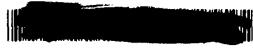


## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P950000 969 10 (1) 1. Corporation Name Retail & Home Delivery Installation Manage-ment Company, Inc.

## **FILED** May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
					OO NOT HIDITE IN THIS S	20405		
				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualified			
2. Principal Place of Business   2s. Mailing Address					4. FEI Number		-ti-d	
			3209 Sawarass Village Cir.			<del></del>	plied For	
Suite, Apl.		Sulte, Apt. #, etc.				\$8.75 A	t Applicable	
22	71 010.	27			5. Certificate of Status Desired	Fee Re		
City & State	6	City & State			Election Campaign Financing	\$5.00	<del></del>	
Bronte Yedra Bch, Florida		20 Ponte Vedra Beh, Florida		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Added to			
Zip	Country	Zip	Country	<i>i</i>	8. This corporation owes or has paid the curr	ent year Inte	angible	
24 32086	2   26 USA	29 32082 30	145	A			No	
	9. Name and Address of Current	Registered Agent	_		10. Name and Address of New Registered	igent		
Baa	d C. Guy		81	Name				
Bond, C. Guy 3010 South 3rd Street			82	Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
		83						
Jac	KsonvilleBeach, Fi	lurida 32250						
			84	City	FL	85 Zip (	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes.	the abov	e-named co	<b></b>	changing it	s registered	
office or r	registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was aut	horized b	y the corpor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	ointment as	registered	
-	an amilia with, and accept the obligati	ions of, Section 607.0505, Florid	ia Statute	S.				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	salstered Ad	ent signature rec	guired when reinstating) DATE			
12.	OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12	
TITLE	0, P, S, T	DELETE	1.1 TITLE	$\neg \neg$		Change	Addition	
NAME	Powell, John		1.2 NAME	ŀ				
STREET ADDRESS	O		1.3 STREE	T ADORESS				
CITY-ST-ZIP	Ronte Vedra Bed		1.4 CITY-	ST-ZIP				
TITLE			2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP					
TITLE		DELETE	3.1 TITLE			Change	Addition	
NAME	ļ		3.2 NAME					
STREET ADDRESS	i		3.3 STAES	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE	DELETE		4.1 TITLE			Change	Additio	
NAME			4. 2 NAM	E				
STREET ADDRESS	1		4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY	ST-ZIP				
TITLE	DELETE		5.1 TITLE			Change	Addition	
NAME	1		5.2 NAME	: [	400002527124 -05/18/9801053023			
STREET AODRESS	RESS 5		5.3 STRE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY		***150.00	<del></del>	7 ( 4 ( 10 )	
TITLE	DELETE		6.1 TITLE		^	L Change	Addition	
NAME			6.2 NAME		(1)	511		
STREET ADDRESS			6.3 STRE	ET ADDRESS	$\sim$	~ \ \ \	1	
CITY-ST-ZIP	<u> </u>		6.4 CITY			<del></del>	1	
14. I hereby indicates	Certify that the information supplied will d on this arguet report or supplemental	th this filing does not qualify for I annual report is true and accur	the exem	ption stated	I in Section 119.07(3)(i), Florida Statutes. I further cature shall have the same legal effect as if made up	ertify that the	a informatior hat 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 an attachment with an address.