

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

**FILED**  
**Apr 28, 1999 8:00 am**  
**Secretary of State**

04-28-1999 90006 003 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P96000051156**

1. Corporation Name  
**RICH RICHARDSON ENTERPRISES INC.**



Principal Place of Business  
**311 BEVERLY PARKWAY  
PENSACOLA FL 32505**

Mailing Address  
**311 BEVERLY PARKWAY  
PENSACOLA FL 32505**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**06/13/1996**

2. Principal Place of Business  
**21 3988 W. Fairfield DR**  
Suite, Apt. #, etc.

2a. Mailing Address  
**26 3988 W. Fairfield Dr**  
Suite, Apt. #, etc.

4. FEI Number  
**59-3388834**

Applied For  
☐ Not Applicable

22 City & State  
**23 Pensacola, FLORIDA**  
Zip  
**24 32505**

27 City & State  
**28 Pensacola Florida**  
Zip  
**29 32505**

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**RICHARDSON, WILLIAM W II  
3345 PURSELL LANE  
PENSACOLA FL 32526**

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 Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submit 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: *William W. Richardson II*

*William W. Richardson II President*

**4/26/99**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>RICHARDSON, WILLIAM W</b>	
STREET ADDRESS	<b>3345 PURSELL LANE</b>	
CITY-STATE-ZIP	<b>PENSACOLA FL 32526</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>RICHARDSON, SARAH R</b>	
STREET ADDRESS	<b>3345 PURSELL LANE</b>	
CITY-STATE-ZIP	<b>PENSACOLA FL 32526</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01(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 an officer or director of the corporation or the officer 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, with all other like empowered.

SIGNATURE: *William W. Richardson II*

*William W. Richardson II President*

**4/26/99**

**850-451-8686**

CR2E034 (1/98)