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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENTIGE GTATE Sandra B. Mortham

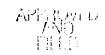
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000068064 (0)

RD CONSULTING, INC.

Mailing Address

Principal Place of Business



97 JUN 23 AM 8: 16

SECRETARY OF STATE TALLAHASSEE, FLORIDA



10161 CENTURION PARKWAY NORTH SUITE 191 JACKSONVILLE FL \$2256		SUITE 191	10161 CENTURION PARKWAY NORTH SUITE 191 JACKSONVILLE FL 32256-0523			Date Incorporated or Qualified	3a. Date of Last Report	
						08/15/1996	Date of Last Report	
2. Principal Pl	lace of Business	2a. Mailing Ad	2e. Mailing Address			4-FEI Number	Applied For	
21		26	26			g i e	Not Applicable	
Suffe, Apt	#, el c.	Suite, Apt.	Suite, Apt. #, etc.			E. Cordificate of Status Desired	\$8.75 Additional	
22	***	27				5. Certificate of Status Desired	Fee Required	
City & State	•	City & Stat	City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Z(p		Country		8. This corporation has liability for	' '	
24	25 29 30 9. Name and Address of Current Registered Agent			30			Yes No	
· · · · · · · · · · · · · · · · · · ·						10. Name and Address of New Registered Agent		
WEIDNER, DONALD W P.A.				["	Ivaille			
10161 CE NTURION PARKWAY NORTH SUITE 19 0				B.	2 Street	Address (P.O. Box Number is Not Accepta	ble)	
				2				
JAC	KSÖNVILLE FL 32256			8	1			
				8			FL 85 Zip Code	
11. Pursuant t office or re agent. I ar	o the provisions of Sections 607.0 egistered agent, or both, in the Standard agent, or both, in the Standard agent the ob-	502 and 607,1508, Flo ite of Florida, Such ch igations of, Section 60	orida Statuti ange was a 07.0505, Flo	es, the abo authorized b orida Statut	ve-named by the cor. es.	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered pl the appointment as registered	
SIGNATURE								
	Signature, typed or printed name of registered		(NO1)		gent signature	a required when reinstating)	DATE	
12.	OFFICERS A	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFI		
TITLE	HUSEMAN, W.N. RUSSELL	l	DELETE	1.1 TITLE			Change Addition	
NAME	10161 CENTURION PARKW	AV MODTU STEA16	14	1.2 NAME				
STREET ADDRESS	JACKSONVILLE FL 32258	AI NORIN SIEFIE	71		1 ADDRESS			
CITY-ST-ZIP TITLE	D	П	DELETE	1.4 CITY - 2.1 TITLE	S1- ZIP		Change Addition	
NAME	WEIDNER, DONALD W ESC		Decer	2.2 NAME			E Onlinge E Addition	
STREET ADDRESS	10181 CENTURION PARKW		01		1 ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32258	AI NOMIII SILE (0 1	2.3 STREE				
TITLE	WISHOOMILEE IE DELOG		DELETE	3.1 TITLE	-31-211		Change Addition	
NAME		_		3.2 NAME				
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP				3.4. CITY				
TITLE			DELETE	4.1 TITLE	V1 EI'		Change Addition	
NAME		_		4. 2 NAM	£			
STREET ADORESS					T ADDRESS			
CITY-ST-ZIP				4.4 CITY-				
TITLE			DELLTE	5.1 1ITLE			Change Addition	
NAME		_		5.2 NAME			_ ,	
STREET ADDRESS					LADDRESS	de alle		
CITY-ST-ZIP				5.4 CITY-		[[1 [1] A]		
TITLE			DELETE	G.1 TILLE	<u> </u>	1 to Class	. Change Addition	
NAME				6.2 NAME		1.1~2	197	
STREET ADDRESS				1	T ADDRESS	1. 0123	17 /	
CITY OF 740		_			ci iii	SHIVE BANK!	/ · · ·	

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the information indicated on this annual report or supplemental gingal 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 torporation of

4/anlan