



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2008 8:00 am
Secretary of State

06-04-2008 90004 007 ***150.00

DOCUMENT # P96000076841					
1. Entity Name RTG INTERSTATE CORP.					
Principal Place of Business 11540 HIGHWAY 92 EAST SEFFNER, FL 33584			Mailing Address 11540 HIGHWAY 92 EAST SEFFNER, FL 33584		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	04222008 Chg-P CR2E034 (12/06) 4. FEI Number 59-3407649 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BEYER, DAVID A C/O PIPER MARBURY RUDNICK & WOLFE LLP 101 E KENNEDY BLVD SUITE 2000 TAMPA, FL 33602			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signatures required when changing)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SEAMAN, JEFFREY		NAME		
STREET ADDRESS	400 PERIMETER CENTER TERRACE, STE. 800		STREET ADDRESS		
CITY, ST, ZIP	ATLANTA, GA 30346		CITY, ST, ZIP		
TITLE	DV	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	STEIN, LEWIS		NAME		
STREET ADDRESS	11540 HWY 92ND E		STREET ADDRESS		
CITY, ST, ZIP	SEFFNER, FL 33584		CITY, ST, ZIP		
TITLE	VST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FINKEL, JEFFREY		NAME		
STREET ADDRESS	400 PERIMETER CENTER TERRACE, STE. 800		STREET ADDRESS		
CITY, ST, ZIP	ATLANTA, GA 30346		CITY, ST, ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KETTLE, J MICHAEL		NAME		
STREET ADDRESS	400 PERIMETER CENTER TERRACE, STE. 800		STREET ADDRESS		
CITY, ST, ZIP	ATLANTA, GA 30346		CITY, ST, ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME			NAME	Peter Weitzner	
STREET ADDRESS			STREET ADDRESS	400 Perimeter Center Terrace, STE 800	
CITY, ST, ZIP			CITY, ST, ZIP	Atlanta, GA 30346	
TITLE		<input type="checkbox"/> Delete	TITLE	VS	<input type="checkbox"/> Change
NAME			NAME	Jamie Sheer	<input checked="" type="checkbox"/> Addition
STREET ADDRESS			STREET ADDRESS	11540 Highway 92 East	
CITY, ST, ZIP			CITY, ST, ZIP	Seffner, FL 33584	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		VP Lewis Stein		4/22/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					