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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000013884

R-N-R RESURFACING, INC.

Principal Place of Business Mailing Address						-		A 1841 8181 1881	
1537 SUGARWOOD CIRCLE 1537 SUGARWOOD CIRCLE WINTER PARK FL 32792 WINTER PARK FL 32792				E				•	·
							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed		
0 Dissipat D	Ness of Business	- 10- 14	-ili Address				02/10/1997		
Principal Place of Business 2a. Mailing Address							4. FEI Number		pplied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							59-3392375		ot Applicable Additional
22 27						5. Certifcate of Status Desired	, , , , ,	Additional equired	
City & State City & State			ty & State				6. Election Campaign Financing	\$5.00	May Be
23 28						Trust Fund Contribution		to Fees	
Zip	Country Zip			Count	try		8. This corporation owes the current	year Intangible	
24				30			Personal Property Tax.	☐ Yes	
9. Name and Address of Current Registered Agent					1		10. Name and Address of New Reg	istered Agent	
CDE			[44]\$P4	8	31	Name			
SPENCER, ANN S				8	82 Street Address (P.O. Box Number is Not Acceptable)				
WINTER PARK FL 32792			8	83				9.37 23	
				8	34	City		85 Zip	Code
								<u> FL </u>	
11. Pursuant to the provisions of Sections 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 arn fathillar with, and sosept the obligations of, Section 607.0505, Florida Statutes.								•	
SIGNATURE SIgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature require								-6-99 DATE	·
12.	Signature, typed or printed name of registeres as			13.	gent	signature required	ADDITIONS/CHANGES TO OFFIC		DRS IN 12
TITLE	P		☐ DELETE	1.1 TITLE	<u> </u>		ADDITIONOS INVIGED TO OTT TO	☐ Change	Addition
NAME	SPENCER, ANN S			1.2 NAMI					_
STREET ADDRESS	AFAT ALIA DINAAAD AD			1.3 STRE	1.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL 32792			1.4 CITY		Į.			
TITLE	VP DELETE			_	2.1 TITLE			Change	Addition
NAME	SPENCER, RICK J			2.2 NAMI	E				
STREET ADDRESS	1537 SUGARWOOD CR.			2.3 STRE	ET A	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL 32792	J	·	2. 4 CITY	-ST-	-ZIP			
TITLE	and the same of th	y	☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME				3.2 NAME	E				
STREET ADDRESS	AMADĀRA TOBIDO 1981 LANGURA LINGAS			3.3 STRE	ETA	ADDRESS			
CITY-ST-ZIP	et a silice in the sistence			3.4. CITY	3.4. CITY+ST-ZIP				
TITLE			☐ DELETE	4,1 TITLE				☐ Change	☐ Addition
NAME	war e			4, 2 NAM	Ε			•	
STREET ADDRESS				4.3 STRE	ETA	ADORESS			
CITY-ST-ZIP				4.4 CITY-	ST-	ZIP		*	
TITLE	,		☐ DELETE	5.1 TITLE			 	☐ Change	Addition
NAME	·			5.2 NAME	Ξ				
STREET ADDRESS	r.			5.3 STRE	ETA	ADDRESS			
C/TY-ST-ZIP	<u> </u>			5.4 CITY-		ZIP			
TITLE	RETURN OF AN ARCHITECT		☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME	Williams of the			6.2 NAME	Ē				

14. 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 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 chapter 607 or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90058 039 ***150.00

CR2E034 (11/98)