

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000014814

1. Entity Name

RSR PROPERTIES & ACQUISITIONS, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90060 050 ***150.00

Principal Place of Business

Mailing Address

522 PIGEON CIR
ORLANDO FL 32825
US

5015 LOUVRE AVENUE
ORLANDO FL 32812-1027

2. Principal Place of Business

3. Mailing Address

305 Dempsey Way
Suite, Apt. #, etc.

305 Dempsey Way
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

Zip 32835

Country USA

City & State

Orlando, FL

Zip 32835

Country USA

4. FEI Number

59-3445705

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RHODES, ROY SCOTT
522 PIGEON CIR
ORLANDO FL 32825

Name

Rhodes, Roy Scott

Street Address (P.O. Box Number is Not Acceptable)

305 Dempsey Way

City

Orlando

FL

Zip Code

32835

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.

SIGNATURE

R. Scott Rhodes

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/00

9. This corporation is eligible to satisfy its Intangible

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$650.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME RHODES, ROY SCOTT
STREET ADDRESS 5015 LOUVRE AVENUE
CITY - ST - ZIP ORLANDO FL 32812

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☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

R. Scott Rhodes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/14/00

Daytime Phone #

CR2E034 (9/99)