

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91258 044 ***150.00

DOCUMENT # P97000056480

1. Entity Name
R & M MEACHAM, INC.



Principal Place of Business

~~1438 N. LARKWOOD SQ.~~
~~FT. MYERS, FL 33919~~

Mailing Address

~~1438 N. LARKWOOD SQ.~~
~~FT. MYERS, FL 33919~~

04003000



2. Principal Place of Business

9519 Gladiolus Preserve Circle
Fort Myers, FL 33908

3. Mailing Address

9519 Gladiolus Preserve Circle
Fort Myers, FL 33908

01312004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-0772929

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEACHAM, MARIETTA C
~~1438 N. LARKWOOD SQ.~~
~~FT. MYERS, FL 33919~~

9519 Gladiolus Preserve Circle
Fort Myers, FL 33908

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete
NAME MEACHAM, MARIETTA C
STREET ADDRESS ~~1438 N. LARKWOOD SQ.~~
CITY-ST-ZIP ~~FT. MYERS, FL 33919~~

TITLE VSD ☐ Delete
NAME MEACHAM, RICHARD
STREET ADDRESS ~~1438 N. LARKWOOD SQ.~~
CITY-ST-ZIP ~~FT. MYERS, FL 33919~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME 9519 Gladiolus Preserve Circle
STREET ADDRESS Fort Myers, FL 33908
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/29/04 235 482-4412