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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 P9700073053 **DOCUMENT #**

1. Corporation Name

R & D Fimber Company Inc.

NC 10/27/17

Principal Place of Business

Mailing Address

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90085 038 ***150.00



62 Va	62 Valencia Street 62 Valencia Street											
St. A	St. Augustine, F1 32084 St. Augustine, F1 32084						DO NOT WRITE IN THIS SPACE					
						i		incorporated	or Qualifed			i
								/22/97				
Principal Place of Business 2a. Mailing Address							4. FEI	Number			1,40	opiled For
21		26					5	9-34654.	17		1140	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certi	fcate of Status	s Desired		.	Additional equired	
City & State	3	City & State					6. Elect	tion Campaign	Financing		\$5.00	May Be
23		128			- 1		t Fund Contrib	_			to Fees	
Zip	Country	ZipCountry				8. This corporation owes the current year Intangible						
24	25	29 30			1	Personal Property Tax.						
Name and Address of Current Registered Agent							10. Nan	e and Addre	ss of New F	legist	ered Agent	
			įŧ	81	Name							į
Pacetti David F.					Cinan	0 ddana	/B O E	ox Number is	Not Assessed	thia)	 -	
62 Valencia Street APT B					Sueer	Address	S (F.O. 5)	OX MUNITION 12	NOI ACCEPTE	ibi e į		ļ
St. A	lugustine, F1 32084		1	83								
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i È			[3	84	City						FL 85 Zia	Code
11. Pursuant 1	to the provisions of Sections 607.0502	and 607,1508, Florida Stati	utes, the abo	ove	-named	corpora	ation sub	mits this state	ment for the	purpo	se of changing its	registered
office or re	egistered agent, or both, in the State of	f Florida. Such change was	authorized l	by t	the corp	oration's	s board o	f directors. I h	ereby accer	ot the a	appointment as re	gistered
:	m familiar with, and accept the obligati	ons or, section dor.osos, n	ionga statut	.63.								
SIGNATURE	Signature, typed or printed name of redistered agent	and the if applicable (NO)	E: Registered A	Geni	Skinature	required wr	nen reinstati	na)		DA î	re	
12.	OFFICERS AND		13.	7.	<u>-</u>				GES TO OF	FICER	S AND DIRECTO	ORS IN 12
TITLE	Pacetti David F	DELETE	1.1 TITL	E		i			<u> </u>		Change	☐ Addition
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NAME	Allen Ronald J		2.2 NAM			1						_
STREET ADDRESS)	1456 Russell Road		1		ADDRESS							
i i	Green Cove Springs,	F1 32043	2.4 CIT			` 						
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NAME			6.2 NAM									i
STREET ADD RESS					ADDRESS							}
CITY-ST-ZIP			6.4 CITY	Y-ST	- ZIP	!						

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 parties, or on an attachment with an address, with all other like empowered.