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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000074020 (3)

FILED Mar 16 1998 8:00am Secretary of State

RTS OF CENTRAL FLORIDA, INC. Principal Place of Business Mailing Address 1501 W. COLONIAL DR. 1501 W. COLONIAL DR. ORLANDO FL 32804 ORLANDO FL 32804 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1997 2. Principal Place of Business 2a. Mailing Address Applied For <u>59-3/176632</u> Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 团 5. Certificate of Status Desired Fee Required 22 City & State City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 24 25 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent REX, WALTER A 1501 W. COLONIAL DR. 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32804 83 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change 1.1 TITLE TITLE REX, WALTER A 1.2 NAME NAME 1501 W. COLONIAL DR. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32804 14 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change ☐ Addition 21 TITLE TITLE TIBBS, JAMES F 2 2 NAME NAME 1501 W. COLONIAL DR. 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32804 2. 4 CITY - ST-ZIP CITY-ST-ZIF DELETE Change Addition DST 3.1 TITLE SAUNDERS, DON B NAME 32 NAME 346 PARK AVE. S. 3.3 STHEET ADDRESS STREET ADORESS **WINTER PARK FL 32789** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP Change DELFIE Addition 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELFTE Change TITLE 61 TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information indicated on this annual report or officer or director of the corporation Block 12 or Block 13 if change of this filling closs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information through report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or or misted of powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

March 9, 1998 (407) 841 6203