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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000074890 (9)

## RICHARDSON MANAGEMENT COMPANY

## FILED May 15 1998 8:00am Secretary of State



		<del> </del>		·		1861) BIBE (1814 1841 8811 1841
Principal Place	e of Business	Mailing Address				
6700 <b>S.</b> Florida ave Ste. 6 Lakeland Fl. 33813		6700 S. FLORIDA AVE., STE. 6 LAKELAND FL 33813			DO MOY INDITE IN T	W0 50 LOS
					DO NOT WRITE IN TH  3. Date Incorporated or Qualified	IIS SPACE
					· ·	
2. Principal Pl	lace of Business	2a. Mailing Addre			08/27/1997 4. FEI Number	Applied For
21		<u>├</u>	26		59-3464799	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Con	untry	8. This corporation owes or has paid the	current year Intangible
24	25	29]	30	· · · · · · · · · · · · · · · · · · ·	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Register	ed Agent
	H <b>ardso</b> n, Joseph P			81 Name	•	
	O <b>\$.</b> FLORIDA AVE., STE. 6			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
LAK	KELAND FL 33813			83		
				03		
				84 City		85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florid	a Statutes, the a	bove-named o	corporation submits this statement for the purpose	e 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE .	Signature typed or printed name of registered ag	oldeniara hold by a local	ØI∩1€ Begietore	d Agent signet re	equired when reinstating) DAT.	
12,		ID DIRECTORS	13.	or who it sifting the i	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DEL		ITLE		Change Addition
NAME	RICHARDSON, JOSEPH P		1.2 N	AME		
STREET ADDRESS	6700 S. FLORIDA AVE., STE.	6	1.3 S	TREET ADDRESS		{
CITY-ST-ZIP	LAKELAND FL 33813		1.4 0	ITY-ST-ZIP		ָּקֿן
TITLE		☐ DEI	ETE 21T	ITLE	,	Change Addition
NAME			2.2 N	AME		
STREET ADDRESS			2.3 S	TREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE		[] DEL	ETE 3.1 TO	TLE		☐ Change ☐ Addition
NAME			3.2 N	AME		
STREET ADDRESS				Treet address		
CITY-ST-ZIP		T se		CITY-ST-ZIP		(A)
TITLE		L_) DEL				Change Addition
NAME			4.2 %	1		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DEL		TLE		Change Addition
NAME		_ <i>D</i> ,,,	5.1 N			T cuquide T vacation
STREET ADDRESS			li li	TREET ADDRESS		
F						
CITY-ST-ZIP TITLE		DEL		TI F		Change Addition
NAME		Off	6.2 N			CT change TI Woulder
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP						]
VIII-01-24			0.9 ()	TY-ST-ZIP		

4. 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 second or supplemental annual reports 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 truffeet empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if charged, or on an attach find with an address.

Block is of block is it of all god, of of the all dos in it was a superior