

2010

FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000014749
1. Entity Name
R & B TRAILER PARK, INC.



Principal Place of Business
4861 GARY ROAD
BONITA SPRINGS, FL 34134

Mailing Address
4861 GARY ROAD
BONITA SPRINGS, FL 34134

FILED

10 NOV 29 AM 9:29

STATE OF FLORIDA
TALLAHASSEE, FLORIDA



02142006 No Chg-P CR2E034 (11/05)

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4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

REMES, BILLIE
4861 GARY ROAD
BONITA SPRINGS, FL 34134

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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 DATE

Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	BEACH, HOWARD
STREET ADDRESS	4680 KEY LARGO LANE
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	DVST
NAME	REMES, BILLIE
STREET ADDRESS	4861 GARY ROAD
CITY-ST-ZIP	BONITA SPRINGS, FL 34134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

700186860747
10/19/10--01006--009 **\$550.00

700186860747
11/29/10--01029--007 **\$200.00

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 DATE 10/19/10 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR