FILED

CR2E034 (9/01)

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED ON

INTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 06, 2002 8:00 am **Secretary of State** DOCUMENT # P98000027681 1. Entity Name 03-06-2002 90001 035 ***150.00 RCR DEVELOPMENT COMPANY, INC. Principal Place of Business Mailing Address 2560 RCA BLVD. 2560 RCA BLVD. **SUITE 112 SUITE 112** PALM BEACH GARDENS FL 33410-3337 PALM BEACH GARDENS FL 33410-3337 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0826476 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MELVILLE, HAROLD G ESQ. Street Address (P.O. Box Number is Not Acceptable) **MELVILLE & SOWERBY, PA** 2940 SOUTH 25TH STREET FORT PIERCE FL 34981-5605 Zip Code 8. The above named entity submit pent for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed pame of r (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be . Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Addition GODOWN, PHILLIP NAME NAME 12477 SEMINOLE BLVD STREET ADDRESS STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-ST-ZIP CITY-ST-ZIP TITLE V/S ☐ Delete TITLE Change ☐ Addition NAME CHAPIN, ROY III NAME 2560 RCA BLVD. SUITE 112 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition Delete NAME REED, A. LACHLAN NAME STREET ADDRESS -114 CLARKE-AVE := STREET ADDRE PALM BEACH FL 33480 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition REED, HUROLDS NAME 12298 INDIAN STREET ADDRESS STREET ADDRESS NORTH PACE BEACH FL 33408 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the property of the pr