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

**PROFIT CCRPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90059 009 \*\*\*150.00

1999

## DOCUMENT # P98000028234

R & D DEVELOPERS, INC.

Principal	Place of	Business

Mailing Address



1919 - 3 BLANDING BLVD. 1919 - 3 BLANDING BLVD. JACKSONVILLE FL 32210 JACKSONVILLE FL 32210 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/25/1998 2a. Mailing Address Applied For 2. Principal Place of Busines 2561 Not Applicable \$8.75 Acditional 5. Certifcate of Status Desired Fee Required 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution Country 8. This corporation owes the current year Intangible <u>U</u>SA **O**USA Personal Property Tax. ☐ Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registere a Agent LANDAU, FRANCINE C 82 1301 RIVERPLACE BLVD., STE. 740 JACKSONVILLE FL 32207 83 84 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 cirectors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE WILSON, DONELL 1.2 NAME NAME 1919 - 3 BLANDING BLVD. 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32210 14 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE TITLE SHERNO, ROBERT 22 NAME NAME 1919 - 3 BLANDING BLVD. 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32210 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 41 TITLE TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 (3)(i), Florida Statutes. I further certify that the information 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 changed or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)