

**2008 FOLIO CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000094835

1. Entity Name
R & D FIREARM COLLECTORS, INC.



Principal Place of Business

**4842 N.W. 27 AVE
MIAMI, FL 33142**

Mailing Address

**4842 N.W. 27 AVE
MIAMI, FL 33142**

FILED
Aug 11, 2008 08:00 AM
Secretary of State



08082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0882124	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**GREENE, RICHARD A
4842 N.W. 27 AVE
MIAMI, FL 33142**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENE, RICHARD A 4842 N.W. 27 AVE MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GREENE, DIXIE R 4842 N.W. 27 AVE MIAMI, FL 33142
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08/11/08-80005-018 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Richard A Greene
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/08 (305) 638-1475
Date Daytime Phone #