

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90140 015 ***150.00

DOCUMENT # P99000051778
1. Entity Name
RSR Enterprises, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
MULTIPLE
Suite, Apt. #, etc.

3. Mailing Address
1310 Robinhood Ln
Suite, Apt. #, etc.

City & State
LAKELAND, FL

City & State
Lakeland, FL 33813

Zip
USA

Zip
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3582509

Applied For
 Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Ronald L. Baeder

Street Address (P.O. Box Number is Not Acceptable)
5107 Lake Miriam Circle

City Lakeland FL Zip Code 33813

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President/Treasurer Ronald L. Baeder 5107 Lake Miriam Circle Lakeland, FL 33813</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V-PT Secretary RICHARD PHILLIPS 1310 Robinhood Ln Lakeland, FL 33813</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

CR2E034B (12/01)

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Phillips RICHARD PHILLIPS, VP 4/16/02 863-644-8688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #