

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

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90018 005 ***150.00

DOCUMENT # P99000059233

1. Entity Name

Rankin Management, Inc.

DO NOT WRITE IN THIS SPACE

44011233

2. Principal Place of Business

2481 Del Lago Drive

Suite, Apt. #, etc.

3. Mailing Address

11605 Old Georgetown Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, FL

City & State

Rockville, MD

4. FEI Number

65-0931905

Applied For

Not Applicable

Zip

33316

Country

USA

Zip

20852

Country

USA

6. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Richard A. Rankin

Street Address (P.O. Box Number is Not Acceptable)

2481 Del Lago Drive

City

Ft. Lauderdale

FL

Zip Code

33316

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 of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

January 1: May 1 Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE President

NAME Richard A. Rankin

STREET ADDRESS 2481 Del Lago Drive

CITY - ST - ZIP Ft. Lauderdale, FL 33316

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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IN THIS SPACE**

12. 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 10 or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Rankin

Date

2/4/04

Daytime Phone #

301-770-6100