## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortinami Secretary of State

1006

	1330		CO WY		DIVISION O	r con on	PV 110	JINO				
DOCUI 1. Corporation		#	S1031									
•		RPR	ISES, INC.									
020	J. ( 2. ( ) 2	#* v1 1.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						1 1 <b>00</b> 000012 100 110011 20000 11001 110		HA MANA BARA AHA	
Principal Place	of Busines	s		 M	lating Address							
	8917 WESTERN WAY				% 1920 SAN MARCO BLVD. JACKSONVILLE FL 32207							
STE 7 JAX FL 32256 US												
					. ,			Date Incorporated or Qualified	3a.	Date of Last R	eport	
								11/01/1990		02/27/19	95	
2. Principal Place of Business 1 4/84 So THIRD ST					2a. Mailing Address			00 0050000			Applied For	
1] 4/84 Jo / H/KD J / Suite, Apt #, etc.					Suite, Apt. #, etc. 27			\$8.75 Additio			Not Applicable	
2				27				5. Certificate of Status Desired			Required	
City & State		7	ach, FL		City & State				6. Election Campaign Financing			<b>0</b> Мау Ве
Zib	BHILLICA		Country	28	Zip	<sub>[</sub>	 intry		Trust Fund Contribution  8. This corporation has liability for			d to Fees
4 322	50	25	421	29	• 4	30	1. to y		·	intangio No		199.032,
	g, Nam	e and	Address of Curre	nt Regis	stered Agent		Ι,	,	10. Name and Address of New	Register	red Agent	
4/47714							81	Name				
KATTMAN, JOHN F. 1920 SAN MARCO BLVD.								Street Add	ress (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32207												
4							84	Cit.			1221 3	
								City			-L   `   '	n Code
<ol> <li>Pursuant t or register</li> </ol>	to the provis	sions d ir both	of Sections 607.050; . in the State of Flori	2 and 60 dai Suct	7.1508, Florida Statu n change was autoori	ites, the abo	ove n	ramed corpo	ration submits this statement for the pa and of directors. Thereby accept the app	rpose of	changing its r	egistered office
familiar wit	th, and aco	ept the	obligations of, Sec	tion 607.	.0505. Ělorida Statute	s.			a di	Oil to their.	a tarrogratores	agon rum
SIGNATURE .	Steaming types	d or prost	 edinare, ol registered ages	ha ginse i	as a directions (for	villa Bouston	(A.phi	Canalana o capa	eliwho reestangi	DA1		
12.			OFFICERS AN		TORS	13.			ADDITIONS/CHANGES TO OF			R\$ IN 12
TITLE	DP OLATA	^	114D) 50 D		□ DELETE	1 11	HLE				Change	Addit on
NAME			Harles R. Creek Club Ri			12 N						
STREET ADDRESS CITY-ST-ZIP			ille fl	,				ADDRESS				
TITLE	DST	JUII.			DELETE	2 1 1	ITY-S TILE	1 - ZIP			☐ Change	Addit on
NAME		DN, S	HARA GAYLE		<b>-</b>	2.2 N						
STREET ADDRESS			CREEK CLUB RE	)		23S	¹REE [	ADURESS				
CITY - SI - ZIP	JACK	SONV	ILLE FL				11 y - S	I - ZIP				·
TUTLE					DELETE	3 1 1					Change	Addition
NAME STREET ADDRESS						32N		ADDRESS				
CITY-ST-ZIP								ADDRESS 7 710				
TITLE					DELETE	4 1 1	ITY - S IFLE	1 411			Change	Addition
NAME	1					4 2 N						
STHEET ADDRESS						435	TREET	ADDRESS				
CITY-ST-ZIP	ļ				·	440	11Y - S	r - zië				
TITLE					DELETE	5 1 1					Change	Addit on
NAME exoser appeared						52N		10004				
STREET ADDRESS						1		ACORESS				
CITY-ST-ZIF TITLE	<del> </del>		··		DELETE	54C	ITY - S ITLE	1- (P			☐ Change	Addition
NAME						62 N						
STREET ADDRESS								ADDRESS				
CITY - ST - ZIF							ITY - S	J				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 Brock 13 if changed, or on an attachment with an address. SIGNATURE: CHARLES & SLATON Charle & SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-6

784 2472701 Cartine Etoia, #