PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # **S71846**

1. Corporation Name

RJK ASSOCIATES, INC.

Mailing Address Principal Flace of Business

2539 FAIRWAY ISLAND DRIVE WEST PALM BEACH FL 33414

2539 FAIRWAY ISLAND DRIVE WEST PALM BEACH FL 33414

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90192 028 ***150.00



DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualifed 08/03/1991		
2. Princips Di	and of Business	2a. Mailing Address	 -	4. FEI Number	Ag	plied For
2. Principal Place of Business 21 518 BRENTWOOD CC		26 518 BRENTWOOD CE		65-0283010	`	1 Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75	Additional
27				5. Certificate of Status Desired	Fee Re	quired
City & State			4	6. Election Campaign Financing	\$5.00	•
23 VIENNA, VA 22180 28 VIENNA, UN Zip Courtry Zip				Trust f und Contribution	Added t	r Fees
		Zip	Country	8. This corporation owes the current year int		(7 N -
24 2218		29 22/80 30	USA	Persor at Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registers d	Agent	
MCCORMICK JANE F				e W. Murphy, Jr.		
2539 FAIRWAY ISLAND DRIVE			82 Street Acdress (P.O. Box Number is Not Acceptable) 340 Royal Palm Way, Suite 100			
	T PALM BEACH FL 33414		83 B3	oyal raim way, suite 100		
11120	TACH DESCRIPTION		63			
			84 City Palm	Beach FL	85 Zip (Side
11, Pursuant	to the provisions of S∈ctions 607.0502 eatstered agent, or both, in the State o	ટ and 607.1508, Florida Statutes, of Florida. Such change was auth	the above-named cor orized by the corporat	poration submits this statement for the purpose of tion's board of cirectors. I hereby accept the appo	intment as re	gistered
agent. at	m familiar with, and a capt the obligat	ipps of, Section 607.0505, Florida	a Statutés.	tion's board of cirectors. I hereby accept the appo		
SIGNATURE	(I SUM W. (VVV)	L Eugen	gistered Agent signature requ	1ny. Je 4-22-	9 <u>9 </u>	
L	orghature, typed or printed name of registered age. OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTO	DES IN 12
12.	D OFFICERS AN	DELETE	1.1 TITLE	ADDITIONS/OFFANGES TO OFF TOZICE / II	Change	Addition
NAME	MCCORMICK, RICHARD G. JR	<u></u>	* 2 1/41/5		<i>r</i> ·	
	2539 FAIRWAY ISLAND DR.		1.3 STREET ADDRESS	518 BRENTWOOD CT		
STREET AOORESS	WEST PALM BEACH FL		14 CITY-ST-ZIP	VIENNA, UA 22180		
CITY-ST-ZIP TITLE	D	[] DELETE	2.1 TITLE	712/1/11	Change	Addition
NAME	MCCORMICK, JANE F.	2				
	2539 FAIRWAY ISLAND DR.		2.3 STREET ADDRESS	518 BRENTWOOD CT		
STREET ADDRESS	WEST PALM BEACH FL			Vienna . UA 22180		
CITY-ST-ZIP	WEST FALM BEACTIFE	□ DELETE	3.1 TITLE	<u> </u>	Change	Addition
NAME			32 NAME			_
STREET ADDRES S			3.3 STREET ADDRESS			
1			3.4. CITY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		Change	Addition
NAME		_	4. 2 NAME			
STREET ADDRESS		İ	4 3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRES		•	5.3 STREET ADDRESS			
CITY-ST-ZIP			54 CITY-SY-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRES			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby o	certify that the information supplied will	h this filing does not qualify for th	e exemption stated in	Section 119.07(3)(i), Florida Statutes. I further c∈	rtify that the i	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 uncler 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.

Richard G. McCornide