

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V16157 (2)

1. Corporation Name

RAIRIGH STUCCO, INC.



Principal Place of Business

2101 CURRY RD
LUTZ FL 33649
US

Mailing Address

9217 LAZY LANE
TAMPA FL 33614
US

2. Principal Place of Business

21 9217 LAZY LANE

Suite, Apt. #, etc

2a. Mailing Address

26 Suite, Apt. #, etc

22 City & State

23 TAMPA, FLORIDA

24 Zip

33614

25 Country

U.S.A.

27 City & State

28 Zip

Country

29 30

3. Date Incorporated or Qualified

02/21/1992

3a. Date of Last Report

02/01/1995

4. FEI Number

59-3117093

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RAIRIGH, RAYMOND L
9217 LAZY LANE
SUITE 603
TAMPA FL 33614

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature of person named as registered agent or registered agent

Signature of Registered Agent (Signature required when fee is \$0.00)

DATE

5-24-96

12. OFFICERS AND DIRECTORS

TITLE PT ☐ DELETE
NAME RAIRIGH, RAYMOND L.
STREET ADDRESS 15511 NORTH FLORIDA AVE.
CITY-ST-ZIP TAMPA FL

TITLE V ☐ DELETE
NAME RAIRIGH, RAYMOND R
STREET ADDRESS 9217 LAZY LANE
CITY-ST-ZIP TAMPA FL

TITLE VS ☐ DELETE
NAME RAIRIGH, RAYMOND L JR
STREET ADDRESS 9217 LAZY LANE
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 113.07(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 Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone

CR2E034 (12/95)