

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 305924

**Entity Name:** R.D. CECIL AND COMPANY**Current Principal Place of Business:**1151 MIDDLE ROAD  
SUITE B  
DIXON, IL 61021-3904**Current Mailing Address:**1151 MIDDLE ROAD  
SUITE B  
DIXON, IL 61021-3904 US**FEI Number:** 36-2710474**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PELKEY, REILLY L  
14238 REESE DRIVE  
LAKE WALES, FL 33898 US*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:** REILLY L. PELKEY

04/27/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                           |
|-----------------|---------------------------|
| Title           | PTD                       |
| Name            | CECIL, ROBERT D           |
| Address         | 1151 MIDDLE ROAD, SUITE B |
| City-State-Zip: | DIXON IL 61021-3904       |

|                 |                       |
|-----------------|-----------------------|
| Title           | VSD                   |
| Name            | IRONS, KEITH L        |
| Address         | 3122 BROOK HARBOUR DR |
| City-State-Zip: | ROCKFORD IL 61114     |

|                 |                   |
|-----------------|-------------------|
| Title           | DIRECTOR          |
| Name            | BUNTON, RICHARD L |
| Address         | 518 N. 5TH STREET |
| City-State-Zip: | OREGON IL 61061   |

|                 |                            |
|-----------------|----------------------------|
| Title           | DIRECTOR                   |
| Name            | CECIL, KIMBERLY J          |
| Address         | 10 DEER PATH               |
| City-State-Zip: | LAKE IN THE HILLS IL 60156 |

|                 |                      |
|-----------------|----------------------|
| Title           | DIRECTOR             |
| Name            | SHEEHY, MICHAEL M    |
| Address         | 1660 NW 132ND STREET |
| City-State-Zip: | CLIVE IA 50325       |

|                 |                |
|-----------------|----------------|
| Title           | DIRECTOR       |
| Name            | HEY, JAMES O   |
| Address         | 986 MILE ROAD  |
| City-State-Zip: | DIXON IL 61021 |

|                 |                |
|-----------------|----------------|
| Title           | DIRECTOR       |
| Name            | HEY, WHITNI M  |
| Address         | 986 MILE ROAD  |
| City-State-Zip: | DIXON IL 61021 |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT D CECIL

PRESIDENT

04/27/2023

Electronic Signature of Signing Officer/Director Detail

Date