2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 711890 Apr 20, 2000 8:00 am Secretary of State 1. Entity Name R.A.C.C.A., INC. 04-20-2000 90079 038 ****61.25 Principal Place of Business Mailing Address 1210 N. CLEARVIEW AVE. 1210 N. CLEARVIEW AVE. TAMPA FL 33607-4910 TAMPA FL 33607 2. Principal Place of Business 3. Mailing Address 3202 Henderson Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 204 City & State Applied For City & State 4. FEI Number Tampa, Fl 59-1113307 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33609-3043 Fee Required Hillsborough 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BISMARCK, KEANE O. 3202 Henderson Blvd. 1210 N. CLEARVIEW AVE. Suite 204 **TAMPA FL 33607** Zip Code 33609-3043 City **Tampa** 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 A CONTRACTOR OF STREET A State State of the state of t SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. P ☐ Addition TITLE Delete TITLE NAME NAME LINGERFELT, BRYAN Rodriguez, Bonnie STREET ADDRESS STREET ADDRESS 604 NORTH GILCHRIST AVENUE 3055 W. Hillsborough Ave. CITY-ST-ZIP CITY-ST-ZIP Tampa FL Tampa, Fl 33614 Change ☐ Delete Addition TITLE TITLE. PE PF. RODRIGUEZ, BONNIE NAME Kizer, Randall NAME STREET ADDRESS STREET ADDRESS 5406 NORTH ROSEMONT 501 S. Faulkenburg Rd., Ste. 13 CITY-ST-ZIP CITY-ST-ZIP Tampa, Fl. 33619 TAMPA FL Delete Addition TITLE ST TITLE Change NAME GROGG, JOHN NAME Houghton, Rick STREET ADDRESS 4325 Ridgemoor Dr. N. STREET ADDRESS **6235 MASSACHUSETTS AVENUE** CITY-ST-ZIP Palm Harbor, Fl 34685 CITY-ST-ZIP NEW PORT RICHEY FL TITLE ☐ Delete TITLE Change Addition Grogg, John NAME NAME KIZER, RANDALL 6235 Massachusetts Ave. STREET ADDRESS STREET ADDRESS 501 SOUTH FALKENBURG RD, STE. 13 CITY-ST-ZIP CITY-ST-ZIP New Port Richey, Fl 34653 <u>tampa Fl</u> TITLE Delete ☐ Change Addition EALES, MALCOM NAME STREET ADDRESS STREET ADDRESS 606 NORTH GILCREST AVENUE CITY-ST-ZIP CITY-ST-ZIP tampa fl TITLE ☐ Detete TITLE · 🖼 Change ☐ Addition Renda, Larry 7173 - 30th Ave. N. NAME HOUGHTON, RICK NAME STREET ADDRESS STREET ADDRESS 4325 RIDEMOOR DRIVE NORTH CITY-ST-ZIP CITY-ST-ZIP St. Petersburg, Fl PALM HARBOR FL 12. I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/14/00

813-870-2607

Daytima Phone #

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aHach. C0066863 #711890

Additional Directors (Block 13)

D

Charles, Mike
1015 Martin Luther King
Tampa,-Fl-33603-

D

Gyoerkoes, Rick 1801 S R 590 Suite D Safety Harbor, Fl 34695

D

Montana, Peter 6903 Cypress Park Dr. #100 Tampa, Fl 33634

D

Easton, Keith 14240 - 60th St. N. Clearwater, Fl 33760

D

Lingerfelt, Bryan 604 N. Gilchrist Avenue Tampa, Fl 33606