FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **TANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P37368

R. R. CASSIDY, INC.					
Principal Place of Business	cipal Place of Business Mailing Address		- I SENISEN SEN LINI LAREN LINIE AISEN LON NION RION MINN ALAN		
P. O. BOX 80231 BATON ROUGE LA 70898	P. O. BOX 80231 BATON ROUGE LA	70898	DO NOT WRITE IN THIS SPACE		
	 		3. Date Incorporated or Qualifed 02/03/1992		
Principal Place of Business 21	2a. Mailing Addres	SS	4. FEI Number 72-0957920		
Suite, Apt. #, etc.	Suite, Apt. #, 6	etc.	5. Certificate of Status Desired 🖔 \$8.		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution Ac		
Zip Countr	y Zip 29	Country 30	8. This corporation owes the current year Intangible Personal Property Tax.		
	ess of Current Registered Agent		10. Name and Address of New Registered Agent		
BROWN, FLETCHER 124 NORTH BREWARD A	VENUE	81 Name 82 Street	Address (P.O. Box Number is Not Acceptable)		

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90043 028 ***158.75



Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

		04 01.9	•	FL ** -	
office or i	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes egistered agent, or both, in the State of Florida. Such change was auth m familiar with, and accept the obligations of, Section 607.0505, Florid	torized by the corpo	corporation submits this statement for the purposoration's board of directors. I hereby accept the appropriate the second statement of the second statement of the second	of changing its repointment as reg	egistered istered to
SIGNATURE	AIOTT D		equired when reinstating): ACCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC		i
.12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	P DELETE	1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition
		1.2 NAME	77 9(7 (32)	_ ,	
NAME	CASSIDY, RANDOLPH R.		X.		
STREET ADDRESS	6565 PIKES LANE	1.3 STREET ADDRESS	•		
CITY-ST-ZIP	BATON ROUGE LA 70808	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change	Addition
TITLE					
NAME	BOLTON, REBECCA J.	2.2 NAME	•	,	
STREET ADDRESS		2.3 STREET ADDRESS	•	- 1	,
CITY-ST-ZIP	BATON ROUGE LA 70808	2.4 CITY-ST-ZIP		☐ Change	Addition
TITLE SOA	DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME		3.2 NAME			
STREET ADDRÉSS	after the manual	3.3 STREET ADDRESS	1977年1日第二日 1971日	n der Nin della	
CITY-ST-ZIP	* 1	3.4. CITY+ST-ZIP			
TITLE 1	DELETE	4.1 TITLE	1980年,新年中部24年(東京教育事業	紀 指版[[]] Change (**)	Addition
NAME BOX DOD		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS		,	
CITY-ST-ZIP		4.4 CITY-ST-ZIP			!`
TITLE	☐ DELETE	5.1 TITLÉ		Change	☐ 'Addition
NAME		5.2 NAME	9 19 N		
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP	And the same of		
TITLE 1%.	CANTERIAL TOPOLOGICA DELETE	6.1 TITLE).	☐ Change	Addition
NAME	8565 FEEL 1 W	6.2 NAME		The second s	
STREET ADDRESS	変異異様的になることがははなっています。こうでは、からでしている	6.3 STREET ADDRESS	Strate a second to the second	•	
CITY-ST-ZIP	(2) ·	6.4 CITY-ST-ZIP			
	postiful that the information aurolical with this filing done not qualify for the	a avametian atatas	d in Section 110 07/3\/i) Elected Statutes 1 further	certify that the in	formation

I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

Secretary/Treasurer 1/8/99

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