



# BUSINESS CORPORATION ANNUAL REPORT

10-2017

NAME OF BUSINESS CORPORATION: Rockford Village Revisited, Inc.

SECRETARY OF STATE ID NUMBER: 0865960 STATE OF FORMATION: NC

REPORT FOR THE FISCAL YEAR END: 12/31/2025

Filing Office Use Only	
E - Filed Annual Report	
0865960	
CA202607206251	
3/13/2026 05:22	
<input type="checkbox"/>	Changes

## SECTION A: REGISTERED AGENT'S INFORMATION

1. NAME OF REGISTERED AGENT: Pamela C. Foy

2. SIGNATURE OF THE NEW REGISTERED AGENT: \_\_\_\_\_  
SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

3. REGISTERED AGENT OFFICE STREET ADDRESS & COUNTY	4. REGISTERED AGENT OFFICE MAILING ADDRESS
<u>154 St. Andrews Dr.</u>	<u>154 St. Andrews Dr.</u>
<u>Advance, NC 27006 Davie County</u>	<u>Advance, NC 27006</u>

## SECTION B: PRINCIPAL OFFICE INFORMATION

1. DESCRIPTION OF NATURE OF BUSINESS: Rental & Leasing

2. PRINCIPAL OFFICE PHONE NUMBER: (336) 287-6717 3. PRINCIPAL OFFICE EMAIL: Privacy Redaction

4. PRINCIPAL OFFICE STREET ADDRESS	5. PRINCIPAL OFFICE MAILING ADDRESS
<u>154 St. Andrews Drive</u>	<u>154 St. Andrews Drive</u>
<u>Advance, NC 27006</u>	<u>Advance, NC 27006</u>

6. Select one of the following if applicable. (Optional see instructions)

- The company is a veteran-owned small business
- The company is a service-disabled veteran-owned small business

## SECTION C: OFFICERS (Enter additional officers in Section E.)

NAME: <u>Paul E Carter</u>	NAME: _____	NAME: _____
TITLE: <u>President</u>	TITLE: _____	TITLE: _____
ADDRESS: _____	ADDRESS: _____	ADDRESS: _____
<u>154 St. Andrews Drive</u>	_____	_____
<u>Advance, NC 27006</u>	_____	_____

## SECTION D: CERTIFICATION OF ANNUAL REPORT. Section D must be completed in its entirety by a person/business entity.

<u>Paul E Carter</u>	<u>3/13/2026</u>
SIGNATURE	DATE

Form must be signed by an officer listed under Section C of this form.

<u>Paul E Carter</u>	<u>President</u>
Print or Type Name of Officer	Print or Type Title of Officer