2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # 243918

1. Entity Name
THE ZIMMER REALTY CO.

Principal Place of Business	Mailing Address
10 WINDSORMERE WAY SUITE 100 OVIEDO, FL 32765	P.O. BOX 623276 OVIEDO, FL 32762

01312007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0941883
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRODFUHRER, BRUCE J
10 WINDSORMERE WAY
SUITE 100
OVIEDO, FL 32765

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ZIMMER,JACK H
STREET ADDRESS	1414 TUSCA TR.
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	V
NAME	ZIMMER,ROBERT H
STREET ADDRESS	341 EDEN RD.
CITY-ST-ZIP	PALM BEACH, FL 33480
TITLE	V
NAME	ZIMMER, JACK H JR
STREET ADDRESS	315 SYLVAN DR.
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	VD
NAME	WALKER, PAMELA SUE
STREET ADDRESS	1059 BLACK ACRE TR
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	TSD
NAME	BRODFUHRER, BRUCE J.
STREET ADDRESS	1415 TUSCA TR.
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000618898
02/08/07-80048-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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: _____ BRUCE J. BRODFUHRER 1/31/07 407-365-7607
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #