

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F40462 (6)

1. Corporation Name

SCHLEGEL-DURBAL, INC.



Principal Place of Business

14115- 63RD WAY NORTH  
CLEARWATER FL 34620  
US

Mailing Address

14115- 63RD WAY NORTH  
CLEARWATER FL 34620  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/11/1981

3a. Date of Last Report

03/01/1995

4. FEI Number

59-2111423

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JAMES O GAGNON  
606 FIRST AVE NORTH  
ST PETERSBURG, FL  
33701

10. Name and Address of New Registered Agent

81 Name

RUDOLF G. SWOBODA

82 Street Address (P.O. Box Number is Not Acceptable)

83 6348- 6TH AVE. N.

84 City

ST. PETERSBURG

85 State

FL

Zip Code

33710

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE RUDOLF G. SWOBODA

(Signature type for principal of registered agent and the if applicable)

(NOTE: Registered Agent Signature required when reinstating)

DATE

2/9/96

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME VOSS, MONIKA  
STREET ADDRESS HANS-SACHS STR. #8  
CITY- ST- ZIP OEHRINGEN GE

2.1 TITLE ☐ DELETE

NAME SWOBODA, RUDOLF  
STREET ADDRESS 3005 5TH AVE NORTH  
CITY- ST- ZIP ST PETERSBURG, FL 00000

3.1 TITLE ☒ DELETE

NAME SCHLEGEL, WOLFGANG  
STREET ADDRESS 14115 63RD WAY NORTH  
CITY- ST- ZIP CLEARWATER FL

4.1 TITLE ☐ DELETE

NAME VOSS, MARKUS  
STREET ADDRESS HANS SACHS STR. #8  
CITY- ST- ZIP OEHRINGEN, GERMANY

5.1 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE-PRESIDENT ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE RUDOLF G. SWOBODA (SWOBODA) 2/9/96 (P13)591-3040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)