

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

FILED

**Feb 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # G58824 (5)

1. Corporation Name
REIMELT CORPORATION



Principal Place of Business: 13330 BYRD DRIVE, ODESSA FL 33556-5312

Mailing Address: 13330 BYRD DRIVE, ODESSA FL 33556-5308

3. Date Incorporated or Qualified: 09/07/1983

3a. Date of Last Report: 02/29/1996

4. FEI Number: 59-2324237

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

2. Principal Place of Business: 21 Suite, Apt #, etc. 22 City & State 23 Zip Country

2a. Mailing Address: 26 Suite, Apt #, etc. 27 City & State 28 Zip Country

9. Name and Address of Current Registered Agent

**BARNETT, LESLIE J ESO
BARNETT, BOLT, KIRKWOOD & LONG
601 BAYSHORE BLVD, SUITE 700
TAMPA FL 33608**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	REIMELT, STEPHAN	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	REIMELT, VIOLETTA	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL 33556	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	SCHUBERT, HORST	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL 33556	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	TUFTS, CAROL	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	JESKEY, ANTHONY	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL 33556	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ANDERSON, ROBERT W	
STREET ADDRESS	13330 BYRD DRIVE	
CITY-ST-ZIP	ODESSA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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, unchanged, or on an attachment with an address.

SIGNATURE: *Carol Tufts* 2/24/97 (813) 920-7434

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Carol Tufts

CR2E034 (9/96)