

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000047391

**Entity Name:** FLORIDA R.E. UNION CORP.

**Current Principal Place of Business:**

299 CHATTANOOGA DRIVE  
FORT MYERS, FL 33905

**Current Mailing Address:**

P.O. BOX 51380  
FORT MYERS, FL 33994 US

**FEI Number:** 33-1224315

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FABIAN, ANNE  
299 CHATTANOOGA DRIVE  
FORT MYERS, FL 33905 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

|                 |                 |                 |                       |
|-----------------|-----------------|-----------------|-----------------------|
| Title           | P               | Title           | VD                    |
| Name            | MUELLER, JULIUS | Name            | FABIAN, ANNE          |
| Address         | DORFSTRASSE 32  | Address         | 299 CHATTANOOGA DRIVE |
| City-State-Zip: | FEUSISBERG 8835 | City-State-Zip: | FORT MYERS FL 33905   |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANNE FABIAN

**DIRECTOR**

**02/13/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date