

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2005 8:00 am**  
**Secretary of State**

01-12-2005 90010 009 \*\*\*150.00

**DOCUMENT # 307055**

1. Entity Name  
**MEDENWALD INCORPORATED**



Principal Place of Business  
2331-1 BRUNER LN  
FT MYERS, FL 33912

Mailing Address  
2331-1 BRUNER LN  
FT MYERS, FL 33912

**20001601**



01042005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-1145451**

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

VOTAW, ROBERT W.  
2331-1 BRUNER LN  
FORT MYERS, FL 33912

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution, ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	STD
NAME	VOTAW, ROBERT W, JR
STREET ADDRESS	1240 WALES DRIVE
CITY- ST- ZIP	FORT MYERS, FL
TITLE	V
NAME	VOTAW, ROBERT W, JR
STREET ADDRESS	1240 WALES DRIVE
CITY- ST- ZIP	FORT MYERS, FL
TITLE	PD
NAME	MEDENWALD, GARY
STREET ADDRESS	151 S.W. 51ST ST.
CITY- ST- ZIP	CAPE CORAL, FL
TITLE	V
NAME	VOTAW, ROBERT W, JR
STREET ADDRESS	1240 WALES DR
CITY- ST- ZIP	FT MYERS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I 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 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:** *R. W. Votaw* *R. W. VOTAW J.P.* *1-7-05* *239 481 0230*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #