


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 307055**  
 1. Entity Name  
**MEDENWALD INCORPORATED**



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

**DO NOT WRITE IN THIS SPACE**



01082007    No Chg-P    CR2E034 (11/05)

4. FEI Number                      Applied For  
 59-1145451                          Not Applicable

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

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

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

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when registering) \_\_\_\_\_ DATE \_\_\_\_\_

**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	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	

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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:** R. W. Votaw    R. W. VOTAW    1-8-07    239 481-0230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #