## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Secretary of State **DOCUMENT #421627** 02-07-2007 90048 040 \*\*\*150.00 1. Entity Name BRITZ & RONDEAU HOLDING CO Principal Place of Business Mailing Address THRITION 30535 OVERSEAS HWY. 30535 OVERSEAS HWY. BIG PINE KEY, FL 33043-3400 BIG PINE KEY, FL 33043-3400 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc 01182007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-2302300 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JOSEPH BRITZ REASIN, RICHARD C., CPA Street Address (P.O. Box Number is Not Acceptable) 30535 OVERSEAS HWY 30362 OVERSEAS HWY. BIG PINE KEY, FL 33043 Zip Code 33043 BIGPINEKEY 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 egistered agent SIGNATURE. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE TITLE ☐ Change ☐ Delete BRITZ, JOSEPH CHARLES NAME NAME STREET ADDRESS 30535 OVERSEAS HWY. STREET ADDRESS CITY - ST- ZIP BIG PINE KEY, FL 330433400 CITY-ST-ZIP Change Addition TITLE TITLE RONDEAU, ROLAND EDWARD NAME DECEASED STREET ADDRESS 1505 SOMBRERO BLVD., #302 STREET ADDRESS MARATHON, FL 33050 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition STD NAME NAME RONDEAU BETTY JEAN STREET ADDRESS STREET ADDRESS ISOS SOMBRERUBLUD #302 CITY-ST-ZIP CITY-ST-ZIP MARATHON, FL. 33050 TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

Feb 07, 2007 8:00 am

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 peciver 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 attachinent with an address, with all other like empowered.

CITY-ST-7IP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF DIRECTOR

Date

Date

CITY-ST-7IP