

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

083417

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 536163 (9)

1. Corporation Name
FRED W. AHLEMEIER, CO. OF FLORIDA

Principal Place of Business Mailing Address
934 SAN CARLOS DR 934 SAN CARLOS DR
FT MYERS BCH FL 33931-2226 FT MYERS BCH FL 33931-2226

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/01/1977 3a. Date of Last Report 06/21/1994
4. FEI Number 43-1146040 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
6. The corporation has liability for intangible tax under S. 192.002, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. # etc 26 Suite, Apt. # etc
22 City & State 27 City & State
24 Zip 25 County 29 Zip 30 County

9. Name and Address of Current Registered Agent
AHLEMEIER, FRED W., JR.
934 SAN CARLOS DR
FT MYERS BCH, FL
FT MYERS BEACH FL 33931

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ (DATE) _____
Signature typed in printed name of registered agent and title 2 applicable. (DATE) Registered Agent signature required when registering.

12. OFFICERS AND DIRECTORS	
TITLE	ST
NAME	AHLEMEIER, BARRY W.
STREET ADDRESS	934 SAN CARLOS DR.
CITY, ST, ZIP	FT. MYERS BCH FL
TITLE	PD
NAME	AHLEMEIER, FRED W. JR.
STREET ADDRESS	8505 DELMAR BLVD.
CITY, ST, ZIP	ST. LOUIS MO
TITLE	V
NAME	AHLEMEIER, FRED W, III
STREET ADDRESS	934 SAN CARLOS DR
CITY, ST, ZIP	FT MYERS BCH, FL 00000
TITLE	V
NAME	NORTON, JOHN
STREET ADDRESS	4539 SW 6TH AVE.
CITY, ST, ZIP	CAPE CORAL FL 33914
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Fred W. Ahlemeier, Jr.*
Fred W. Ahlemeier, Jr.

4/21/95 813-463-1001