

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90159 040 ****61.25

DOCUMENT # 716271

1. Entity Name



SCHLARAFFIA FLORIDANA, INC.

Principal Place of Business

KURT SCHIEFER
PO BOX 1053
INDIAN ROCKS BEACH FL 33785
US

Mailing Address

KURT SCHIEFER
PO BOX 1053
INDIAN ROCKS BEACH FL 33785
US

2. Principal Place of Business

HEIKO GROSS

Suite, Apt. #, etc.

1042 STRATTON AVE

City & State

SPRING HILL, FL.

Zip

34609

Country

3. Mailing Address

HEIKO GROSS

Suite, Apt. #, etc.

1042 STRATTON AVE

City & State

SPRING HILL, FL.

Zip

34609

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

23-7295072

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHROEDER, GUENTHER E
732 VINOY PLACE
555 5TH AVE. NE
SAINT PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME NEAGELIN, GUENTER ☒ Delete
STREET ADDRESS 589 OCEANVIEW AVENUE
CITY-ST-ZIP PALM HARBOR FL 34683

TITLE VP
NAME COMBERG, HARTMUT ☐ Delete
STREET ADDRESS 620 FIFTH STREET N.
CITY-ST-ZIP SAINT PETERSBURG FL 33701

TITLE VP
NAME HENKEL, RONALD H ☐ Delete
STREET ADDRESS 921 LANTANA AVE.
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE SD
NAME SCHIEFER, KURT ☒ Delete
STREET ADDRESS PO BOX 1053
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785

TITLE TD
NAME SIEGRIST, RUDOLF ☐ Delete
STREET ADDRESS 4801 OSPREY DR S, #410
CITY-ST-ZIP ST. PETERSBURG FL 33711

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME SCHROEDER GUENTHER
STREET ADDRESS 732 VINOY PLACE
CITY-ST-ZIP 555 5TH AVE. NE
ST. PETERSBURG, FL. 33701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME GROSS HEIKO
STREET ADDRESS 1042 STRATTON AVE.
CITY-ST-ZIP SPRING HILL, FL. 34609

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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: Rudolf Siegrist RUDOLF SIEGRIST, TD. 727-864-6802

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/27/05