

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # G60543

1. Entity Name
HAUSER & RINKEL, INC.



Principal Place of Business
C/O RALPH F. HAUSER, JR.
2027 MONROE STREET
FORT MYERS, FL 33901

Mailing Address
C/O RALPH F. HAUSER, JR.
2027 MONROE STREET
FORT MYERS, FL 33901



03052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2328403

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAUSER, RALPH F., JR.
2027 MONROE STREET
FORT MYERS, FL 33901

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, 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 PD
NAME HAUSER, RALPH F., JR.
STREET ADDRESS 2920 CENTRAL AVE.
CITY-ST-ZIP FORT MYERS, FL

TITLE SD
NAME HAUSER, THOMAS D.
STREET ADDRESS 1816 CORBET RD.
CITY-ST-ZIP N. FT. MYERS, FL

TITLE TD
NAME HAUSER, CLAYTON F.
STREET ADDRESS 2920 CENTRAL AVE.
CITY-ST-ZIP FORT MYERS, FL

TITLE VPD
NAME HAUSER, VIVIAN J.
STREET ADDRESS 2920 CENTRAL AVE.
CITY-ST-ZIP FORT MYERS, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000686337
04/09/07-80041-019 150.00

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IN THIS SPACE

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:

Ralph F. Hauser Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-16-07 239 9101048