FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



appears in Block 12 or Block 13 if changed, or on an attachment with an address

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of state
DIVISION OF CORPORATIONS

FILED

Feb 25 1997 8:00am

Secretary of State

DOCUMENT # H89286

(9)

RECO CONSULTANTS, INC.

Mailing Address Principal Place of Business 4730 HARVEST BEND 4730 HARVEST REND SARASOTA FL 34235-6912 SARASOTA FL 34235 3. Date Incorporated or Qualified 3a. Date of Last Report 12/09/1985 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2622315 21 26 Not Applicable Suite. Apl. # etc Suite. Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JONES, ROBERT A. Frances C. Jones 4730 HARVEST BEND Street Address (P.O. Box Number is Not Acceptable)
4730 Harvest Bend 62 SARASOTA FL 34235 83 Zip Code 34235 84 City Sarasota 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. RANCES C. JONES
RANCES C. JONES when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. A Change DELETE noitibbA 1.1 TITLE TITLE FISCHER, DEBORA K 1.2 NAME NAME 5546 SALEM DRIVE N. 1.3 STREET ADDRESS STREET ADDRESS Carmel, IN 46033 CARMEL IN CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE Addition 2.1 TITLE TITLE JONES, FRANCES C. 2.2 NAME NAMS 4730 HARVEST BEND STHEET ADDRESS 2.3 STREET ADDRESS Sarasota, FL 34235 SARASOTA FL CITY - ST - 7P 2 4 CITY-ST-ZiP DELETE Change Addition 3.1 TITLE THLE 3.2 NAME NAM: 3 3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CHY-SI-ZP DELETE ☐ Change Addition 4.1 TITLE TIFLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 14. If do 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 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 execute this report as required by Chapter 607, Florida Statutes; and that my name