FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **J68344** **(7)**

1. Corporation Name
ROHRER PROPERTIES, INC.

Principal Place of Business
C/O WILLIAM SCHWEIKHARDT
900 SIXTH AVE. SOUTH
NAPLES FL 33940

Mailing Address
C/O WILLIAM SCHWEIKHARDT
900 SIXTH AVE. SOUTH
NAPLES FL 33940

3. Date Incorporated or Qualified: **04/21/1987**
3a. Date of Last Report: **02/21/1995**

2. Principal Place of Business
21 c/o Cecil T. Farrington
22 Suite, Apt. #, etc.: 221 South Andrews Avenue
23 City & State: Fort Lauderdale, FL
24 Zip: 33301
25 Country: U.S.A.

2a. Mailing Address
26 c/o Cecil T. Farrington
27 Suite, Apt. #, etc.: 221 South Andrews Avenue
28 City & State: Fort Lauderdale, FL
29 Zip: 33301
30 Country: U.S.A.

4. FEI Number: **98-0093736** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SCHWEIKHARDT, WILLIAM
900 SIXTH AVE SO
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name: CECIL T. FARRINGTON ATTORNEY AT LAW
82 Street Address (P.O. Box Number is Not Acceptable): 221 SOUTH ANDREWS AVE.
83 FT. LAUDERDALE
84 City: FL 85 Zip Code: 33301

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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: Cecil T. Farrington — Cecil T. Farrington — DATE: MAR 18 1996

12. OFFICERS AND DIRECTORS

TITLE: D
NAME: ROHRER, ANNA ROSA
STREET ADDRESS: 10 WYTMATTSRASSE
CITY-ST-ZIP: 2540 GRENCHEN SW
☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP ☐ Change ☐ Addition
21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP ☐ Change ☐ Addition
31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP ☐ Change ☐ Addition
41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP ☐ Change ☐ Addition
51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP ☐ Change ☐ Addition
61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP ☐ Change ☐ Addition

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

SIGNATURE: Anna Rosa Rohrer — ANNA ROSA ROHRER — PRESIDENT — DATE: FEBR. 29 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)