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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name K03212

(3)

ROBERT K. BATSCHER AND ASSOCIATES, INC.

Principal Place of Business Mailing Address						Mt MtMts Willer MtMts Millis	##### #####     ###	
% ROBERT K. BATSCHER 68 SEVENTH STREET. BONITA SHORES BONITA SPRINGS FL 34134 US		% ROBERT K. BATSCHER 68 SEVENTH STREET. BONITA SHORES BONITA SPRINGS FL 34134 US		,	DO NOT WRITE IN THIS SPACE			
05						3. Date Incorporated or Qualified		
2 Principal F	Place of Business	2a. Mailing Address				11/23/1987 4. FEI Number	<del></del>	T
21	race of business	⊢,				***************************************		Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.				65-0015426		Not Applicable
22		27			5. Certificate of Status Desired		5 Additional Required	
City & State		City & State			6. Election Campaign Financing			
23		28			Trust Fund Contribution		00 May Be led to Fees	
Zip	Country Zip C			,		8. This corporation owes or has pa	aid the current year	Intangible
24	25		30			Personal Property Tax due June		□ No
	<ol><li>Name and Address of Current</li></ol>	Registered Agent				10. Name and Address of New Re	gistered Agent	
BA	TSCHER, ROBERT K.		81	Na	lame			
	SEVENTH STREET BONITA SHOP	S 82 Street A		treet Addres	s (P.O. Box Number is Not Acceptat	ole)		
BO	NITA SPRINGS FL 33923		83	<del> </del>				
			84	Ci	*:***		loel -	
·····				ļ			-  -  -  -  -  -  -  -  -  -  -  -  -	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 Signature, typed or printed name of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstalling)  DATE								
12.	OFFICERS AND		13.	IN SIG	friatore required t	ADDITIONS/CHANGES TO OFFICE	PATE AND DIRECT	ODS IN 12
TITLE	PS	☐ DELETE	1.1 TITLE			ADDITIONS/OFFANGES TO OFFIC	Chang	
NAME	BATSCHER, ROBERT K.		1.2 NAME					,0
STREET ADDRESS	68 7TH ST. BONITA SHORES		1.3 STREET	ADDP	BESS			
CITY-ST-ZIP	BONITA SPRINGS FL		1.4 CITY-S					
TITLE	VT	☐ DELETE	2.1 TITLE	,		······································	☐ Chang	ge Addition
NAME	BATSCHER, BARBARA J.		2.2 NAME					
STREET ADDRESS	68 7TH ST. BONITA SHORES		2.3 STREET	ADDR	RESS			
CITY-ST-ZIP	BONITA SPRINGS FL		2. 4 CITY - S		i			
TITLE		☐ DELETE	3.1 TITLE				Chang	e
NAME			3.2 NAME				1	
STREET ADDRESS			3.3 STREET	ADDR	RESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP		p			
TITLE		DELETE	4.1 TITLE				Chang	e Addition
NAME			4. 2 NAME					İ
STREET ADDRESS			4.3 STREET	ADDR	₹ESS			
CITY-ST-ZIP			4.4 CITY - ST	[-ZIP	,			
TITLE		■ DELETE	5.1 TITLE			3	Chang	e Addition
NAME			5.2 NAME					;
STREET ADDRESS			5.3 STREET	ADDRI	RESS			1
CITY-ST-ZIP			5.4 CITY-ST	í - ZIP	,			
TITLE		DELETE	6.1 TITLE				Chang	e Addition
NAME			6.2 NAME					ĺ
STREET ADDRESS			6.3 STREET A	ADDRI	IESS			
CITY-ST-ZIP		!	6.4 CITY - ST					
14 I horoby o	artifu that the information cumuliad with	this filing does not qualify for (	ha everet	lan i		ntion 110 07/2\/i\ Electeda Statuton 1:	formation and a second first the second	le a de farance d'ani

quality for the exemption stated in Section 119.0/(3)(i), Florida Statutes. I turther certify that the informatic and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**FILED** 

Jan 21 1998 8:00am

Secretary of State