

**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

APPROVED AND FILED

96 FEB 29 AM 9:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # **L37217** (1)

1. Corporation Name  
**REEMARK FLORIDA MANAGEMENT, INC.**

Principal Place of Business: **C/O RENE A. GAREAU, 4273 BOCA POINTE DRIVE, SARASOTA FL 34238**  
Mailing Address: **C/O RENE A. GAREAU, 4273 BOCA POINTE DRIVE, SARASOTA FL 34238**

3. Date Incorporated or Qualified: **12/19/1989**  
3a. Date of Last Report: **05/01/1995**  
4. FET Number: **65-0164936**  
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **RENE A. GAREAU, 4273 BOCA POINTE DRIVE, SARASOTA FL 34238**  
10. Name and Address of New Registered Agent (81-85) fields: Name, Street Address, City, State (FL), 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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature: typed or printed name of registered agent and title, if applicable. (If "SOLE" Registered Agent, signature required with name and title.)

12. OFFICERS AND DIRECTORS (1-6) and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (7-12) fields with sub-headers for Title, Name, Street Address, City-St-Zip, and checkboxes for Delete, 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)(k), 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: [Signature] **Sheldon Fenton** February 6, 1996  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)