

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 # **L61064** (6)

1. Corporation Name

RAEBURN PROPERTY MANAGEMENT & RENTALS, INC.



Principal Place of Business

Mailing Address

509 S TAMiami TRAIL
PO BOX 387
VENICE FL 34284-0387
US

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PO BOX 387
VENICE FL 34284-0387
US

3. Date Incorporated or Qualified 03/29/1990	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0185409	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	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SLATER, GEORGE E.
200 N. TAMiami TRAIL
SUITE D
VENICE FL 34285

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
				FL

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 of Registered Agent (must be signed by the agent)

Signature of Registered Agent (must be signed by the agent)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1. TITLE	2. NAME
NAME	STREET ADDRESS	3. STREET ADDRESS	4. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	5. TITLE	6. NAME
NAME	STREET ADDRESS	7. STREET ADDRESS	8. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	9. TITLE	10. NAME
NAME	STREET ADDRESS	11. STREET ADDRESS	12. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	13. TITLE	14. NAME
NAME	STREET ADDRESS	15. STREET ADDRESS	16. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	17. TITLE	18. NAME
NAME	STREET ADDRESS	19. STREET ADDRESS	20. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	21. TITLE	22. NAME
NAME	STREET ADDRESS	23. STREET ADDRESS	24. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	25. TITLE	26. NAME
NAME	STREET ADDRESS	27. STREET ADDRESS	28. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	29. TITLE	30. NAME
NAME	STREET ADDRESS	31. STREET ADDRESS	32. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	33. TITLE	34. NAME
NAME	STREET ADDRESS	35. STREET ADDRESS	36. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	37. TITLE	38. NAME
NAME	STREET ADDRESS	39. STREET ADDRESS	40. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	41. TITLE	42. NAME
NAME	STREET ADDRESS	43. STREET ADDRESS	44. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	45. TITLE	46. NAME
NAME	STREET ADDRESS	47. STREET ADDRESS	48. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	49. TITLE	50. NAME
NAME	STREET ADDRESS	51. STREET ADDRESS	52. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	53. TITLE	54. NAME
NAME	STREET ADDRESS	55. STREET ADDRESS	56. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	57. TITLE	58. NAME
NAME	STREET ADDRESS	59. STREET ADDRESS	60. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	61. TITLE	62. NAME
NAME	STREET ADDRESS	63. STREET ADDRESS	64. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	65. TITLE	66. NAME
NAME	STREET ADDRESS	67. STREET ADDRESS	68. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	69. TITLE	70. NAME
NAME	STREET ADDRESS	71. STREET ADDRESS	72. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	73. TITLE	74. NAME
NAME	STREET ADDRESS	75. STREET ADDRESS	76. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	77. TITLE	78. NAME
NAME	STREET ADDRESS	79. STREET ADDRESS	80. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	81. TITLE	82. NAME
NAME	STREET ADDRESS	83. STREET ADDRESS	84. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	85. TITLE	86. NAME
NAME	STREET ADDRESS	87. STREET ADDRESS	88. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	89. TITLE	90. NAME
NAME	STREET ADDRESS	91. STREET ADDRESS	92. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	93. TITLE	94. NAME
NAME	STREET ADDRESS	95. STREET ADDRESS	96. CITY, ST, ZIP
CITY, ST, ZIP	TITLE	97. TITLE	98. NAME
NAME	STREET ADDRESS	99. STREET ADDRESS	100. CITY, ST, ZIP

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 recorder 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:

George E. Slater
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
George E. Slater

January 16, 1996

Date

Signature of Officer

CR2E034 (12/95)