2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



FILED

Apr 27, 2007 8:00 am Secretary of State DOCUMENT # N00000007206 04-27-2007 90179 045 ****61.25 RHEÉM TEAM DEALERS OF SOUTHWEST FLORIDA. Principal Place of Business Mailing Address 3727 ENTERPRISE AVE 3727 ENTERPRISE AVE NAPLES, FL 34104 NAPLES, FL 34104 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-3694109 Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JACKSON, PAUL D 3727 ENTERPRISE AVE Street Address (P.O. Box Number is Not Acceptable) NAPLES, FL 34104 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Fiorida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITI F ☐ Delete TITLE ☐ Change Addition JACKSON, PAUL D BAKER, MER MIKE NAME 3727 ENTERPRISE AVE STREET ADDRESS 907 SE 14 14 AV STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34104 CAPE CONAL FL 33940 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition BAKER, EUGBNE STEWART, JOHN NAME NAME 9075E 14 1 AV 93A MILDRED DRIVE STREET ADDRESS STREET ADDRESS CHPE CONGL FL 33990 CITY-ST-7IP FT MYERS, FL 33901 CITY-ST-ZIP TITLE ☐ Delete tine ☐ Chance Addition BOREK, FRANK 1511 GRETCHEN AV SERIICK, WILLIAM S 606 CENTER ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT MYERS, FL 33907 CITY-ST-ZIP LEHIGH ACRES , FL 33971 TITLE SD ☐ Delete TITLE Addition BOREK, GREG 1511 GRETCHEN AU AUGER, DAVID K NAME NAME STREET ADDRESS 1020 PINE ISLAND RD STE 107 STREET ADDRESS CITY-ST-7IP CAPE CORAL, FL 33915 CITY-ST-ZIP LEHIGH ACRES FL 33971 Addition Delete TITLE TITLE TROY BLALOCK, TROY **BLALOCK, THOMAS** NAME 1027 SE 12767 STREET ADDRESS 1027 SE 12 CT STREET ADDRESS CAPE CONAL FL 33990 CITY - ST - ZIP CAPE CORAL, FL 33990 CHY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition HART, RON NAME NAME STREET ADDRESS 606 CENTER ROAD STREET ADORESS FT MYERS, FL 33907 CITY-ST-7IP CITY-ST-2IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports true and acceptate 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 compowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an applicated with all other pieces.

SIGNATURE:

PAUL D. SHUKSON 4-25-2007