


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 02, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000002798 1. Entity Name REHWINKEL FENCE INC.	
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Principal Place of Business 4554 YELLOW BRID TRAIL TALLAHASSEE, FL 32310	Mailing Address 4554 YELLOW BRID TRAIL TALLAHASSEE, FL 32310
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05012006 No Chg-P CR2E034 (11/05)

4. FEI Number 02-0663070	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent REHWINKEL, JACQUELYN 4554 YELLOW BRID TRAIL TALLAHASSEE, FL 32310

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000558131
05/17/06-80083-015 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES REHWINKEL, JACQUELYN 4554 YELLOW BIRD TRAIL TALLAHASSEE, FL 32310
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPRE REHWINKEL, DAVID E MR. 4554 YELLOW BIRD TRAIL TALLAHASSEE, FL 32310
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jacquelyn Rehwinkel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/06 *850 556-7111*
Date Daytime Phone #