2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State
04-05-2006 90159 028 ***150.00

DOCUMENT # P03000126784

1. Entity Name
FREISING PROPERTY, INC.

Principal Place of Business	Mailing Address
1323-B CAPE CORAL PKWY EAST CAPE CORAL, FL 33904	1323-B CAPE CORAL PKWY EAST CAPE CORAL, FL 33904

66011804

01192006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1031705
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHUTT, DARRIN R
1105 CAPE CORAL PKWY EAST
SUITE 1105
CAPE CORAL, FL 33904

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: _____ DATE
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating)

FILE NOW!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	MEINS, HARTMUT
STREET ADDRESS	1323-B CAPE CORAL PKWY EAST
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	S
NAME	HILL, THOMAS W
STREET ADDRESS	1318 LAFAYETTE STREET
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: Linda Wiese 04/17/06 239-549-5400
(SIGNATURE AND TYPED OR PRINTED NAME OF SEPARATE OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

DMI of Southwest Florida, Inc
Lic. Real Estate Broker
1323B Cape Coral Pkwy East
Cape Coral, Florida 33904

ATTACHMENT

660118804

#P03800126784

CHARLAND

NOT NEGOTIABLE

☐ TAX DEDUCTIBLE ITEM $_____

BMI OF SOUTHWEST FLORIDA INC
LIC. REAL ESTATE BROKER
ESCROW ACCOUNT
1323-B CAPE CORAL PKWY E 941-549-5400
CAPE CORAL, FL 33904-9606

7068

63-215/631

03/28/06

BAL FORD

THIS ITEM 150 00

BALANCE

DEPOSIT

OTHER

BAL FORD

#. Department of State Div. of Corp. One hundred fifty 00/100

SUNTRUST ACH RT 061000104

FEI # 20-1031705

[redacted]

CHARLAND

NOT NEGOTIABLE

☐ TAX DEDUCTIBLE ITEM $_____

BMI OF SOUTHWEST FLORIDA INC
LIC. REAL ESTATE BROKER

7069