## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

REICO, INC.

DOCUMENT # P26198

**FILED** Apr 02 1997 8:00am Secretary of State

Principal Place of Business 737 HOLLYWOOD BLVD., N.W. FT, WALTON BEACH FL 32548 US		Mailing Address			n jameimas ism erüst mistat einem einem ister	midir Mibri mabit didis dibit mine tabi	
		1209 ORANGE ST. WILMINGTON DE 19801-1120					
00					3. Date Incorporated or Qualified 09/25/1989	3a. Date of Last Report 02/12/1996	
2. Principal Place o	of Business	2a. Mailing Addre	ISS		4. FEI Number	Applied For	
21		26			59-2973441	Not Applicable	
Suite Apt. # etc	2	Suite, Apt. #, 6	etc.	**************************************	5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip <b>24</b>	Country 25	Zip 29	30	intry		y for intangible tax under s. 199.032, Xes  \text{No}	
9.	Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Reg	gistered Agent	
	PORATION SYSTEM			81 Name			
1200 S. PINE ISLAND ROAD PLANTATION FL 33324				82 Street Address (P.O. Box Number is Not Acceptable)			

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.

S'GNATURE						
	Signor inelitysko or printed name of rugistimid agent and title if applicat	ole (NOTE: R	egistered Agent signature		n nincoton	0.00.40
12.	OFFICERS AND DIRECTORS	7 22 22	13.	ADDITIONS/CHANGES TO OFFICERS ANI		
11116	PD	DELETE	1.1 TITLE		Change	Addition
NAME	IRONS, RONALD E.		1.2 NAME			
STREET ADDRESS	737 HOLLYWOOD BLVD., N.W.		1.3 STREET ADDRESS			
CITY-ST-7IP	FT. WALTON BEACH FL		1.4 CITY - ST - ZIP			
TI*LE	VD	DELETE	2.1 TITLE		Change	Addition
NAME	WILKE, DONALD R.		2.2 NAME			
STREET ADDRESS	737 HOLLYWOOD BLVD., N.W.		2.3 STREET ADDRESS			
City-S1-ZiP	FT. WALTON BEACH FL		2. 4 CITY-ST-ZIP			
TITL <del>!</del>	VD	DELETE	3.1 TITLE		Change	☐ Addition
NAME	POMROY, ROBERT A.		3.2 NAME			
STEEFT ADDRESS	737 HOLLYWOOD BLVD., N.W.		3.3 STREET ADDRESS			
City+St-ZiP	FT. WALTON BEACH FL		3.4. CITY-ST-ZIP			
701.6		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY+SI- ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5 1 TIFLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
001Y - ST - 21P			5.4 CITY-ST-ZIP			
THLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CHY-ST-ZIF			6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changes, or or an attachment with an address.

Donall R. Wilke

Zip Code