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Mar 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000021402 (1)

1. Corporation Name
REINHARD REALTY, INC.



Principal Place of Business

3033 RIVIERA DR.
SUITE 106
NAPLES FL 33940

Mailing Address

3033 RIVIERA DR.
SUITE 106
NAPLES FL 34103-2746

3. Date Incorporated or Qualified
03/16/1993

3a. Date of Last Report
04/22/1996

2. Principal Place of Business

21 5551 Ridgewood Drive

Suite, Apt. #, etc.

22 Suite 405

City & State

23 Naples, Florida

Zip

24 34108

Country

25 USA

2a. Mailing Address

26 5551 Ridgewood Drive

Suite, Apt. #, etc.

27 Suite 405

City & State

28 Naples, Florida

Zip

29 34108

Country

30 USA

4. FEI Number

65-0399014

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

9. Name and Address of Current Registered Agent

GOODMAN, KENNETH D
3033 RIVIERA DR.
SUITE 106
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
5551 Ridgewood Drive

83 Suite 405

84 City
Naples

FL

85 Zip Code
34108

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME OTTEMOLLER, REINHARD
STREET ADDRESS 3033 RIVIERA DR., SUITE 106
CITY-ST-ZIP NAPLES FL

TITLE AS ☐ DELETE

NAME GOODMAN, KENNETH D
STREET ADDRESS 6622 NEWHAVEN CIR.
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS 5551 Ridgewood Drive, Suite 405
1.4 CITY-ST-ZIP Naples, Florida 34108

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS Naples, Florida 34109
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 changed, or on an attachment with an address.

SIGNATURE:

Kenneth D. Goodman 2/19/97 941-514-4900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)