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Aug 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000022288

1. Corporation Name

SIGL AND MILLER AMERICA, INC

NEW NAME: SIGL AND PARTNERS AMERICA INC 7/22/97

Principal Place of Business

Mailing Address

INC.

13880 TREELINE AVE SOUTH UNIT C
FT MYERS, FL 33913

3. Date Incorporated or Qualified

3a. Date of Last Report

6-23-95

8-8-96

2. Principal Place of Business

2b. Mailing Address

21 13880 TREELINE AVE

26 Suite, Apt. #, etc.

22 UNIT C

27 Suite, Apt. #, etc.

23 City & State

28 City & State

FT MYERS

24 Zip 33913

Country

25 LEE

29 Zip

Country

4. FEL Number

65-0495504

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

10. Name and Address of New Registered Agent

Willie WATERSBERGER

81 Name MICHAEL McDONALD

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

15196 PORTS OF JONAH

83

84 City FT MYERS

FL

85 Zip Code 33913

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VICE PRESIDENT / SECRETARY
NAME WILLIE WATERSBERGER
STREET ADDRESS 4500 BONITA BEACH RD NO 26
CITY-ST-ZIP BONITA BEACH, FLA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRESIDENT
1.2 NAME HANS RESING
1.3 STREET ADDRESS 13600 HARBOUR RIDGE DR
1.4 CITY-ST-ZIP FT MYERS, FL 33908

2.1 TITLE SEC / TREASURER
2.2 NAME MICHAEL D. McDONALD
2.3 STREET ADDRESS 15196 PORTS OF JONAH
2.4 CITY-ST-ZIP FT MYERS, FL 33908

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/16/97

941-561-1399

CR2E034 (9/96)