

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000043230 (9)**

1. Corporation Name
REASONABLE IMPROVEMENTS, INC.

Principal Place of Business Mailing Address
76 GLENMONT DR W N FT MYERS FL 33917 **76 GLENMONT DR W N FT MYERS FL 33917**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified **06/06/1994** 3a. Date of Last Report

2. Previous Officers and Directors
21. Name 22. Mailing Address
23. State, Apt. #, etc. 24. City & State
25. City & State 26. State, Apt. #, etc.
27. City & State 28. City & State
29. City 30. State

4. FEI Number **65-04 92 537** 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**
7. The corporation has liability for franchise tax under 199 Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**SPICER, KAREN
76 GLENMONT DR W
N FT MYERS FL 33917**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number if Not Accepted)
83.
84. City 85. Zip Code

FL

11. Pursuant to the provisions of Sections 607.02(2) and 607.14(1)(b), 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 607.02(2), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS
NAME: **D SPICER, KAREN**
STREET ADDRESS: **76 GLENMONT DR W N FT MYERS FL 33917**
CITY & STATE: **D SPICER, DWAYNE**
STREET ADDRESS: **76 GLENMONT DR W N FT MYERS FL 33917**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
14. NAME 15. STREET ADDRESS 16. CITY & STATE
17. NAME 18. STREET ADDRESS 19. CITY & STATE
20. NAME 21. STREET ADDRESS 22. CITY & STATE
23. NAME 24. STREET ADDRESS 25. CITY & STATE
26. NAME 27. STREET ADDRESS 28. CITY & STATE
29. NAME 30. STREET ADDRESS 31. CITY & STATE

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and shows, not equally, for the corporation stated in line item 1110 of the 1995 Florida Statutes. I further certify that the information included on this annual report or consolidated annual report is true and correct and that the corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation at the time of filing this report as required by Chapter 607, Florida Statutes, and that my name appears on the corporation's books and records in relation to this report.

SIGNATURE: X *Karen Spicer* **Karen Spicer** 7-28-95 813-656-0123
SECRETARY AND TYPED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR