

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

FILED
Apr 21 1998 8:00am
Secretary of State

| | | |
|---|---|---|
| PROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **P94000082136 (0)**

1. Corporation Name
MORGAN LAUR REINMAN, P.A.

Principal Place of Business

**1880 N. ATLANTIC AVENUE
SUITE 615
COCOA BEACH FL 32931**

Mailing Address

**1880 N. ATLANTIC AVENUE
SUITE 615
COCOA BEACH FL 32931**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1994

4. FEI Number

59-3282697

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business
21 **335 S. Plumosa Street**

Suite, Apt. #, etc.

22 **Suite D**

City & State

23 **Merritt Island, FL**

Zip

24 **32952**

Country

25 **Brevard**

2a. Mailing Address

26 **335 S. Plumosa Street**

Suite, Apt. #, etc.

27 **Suite D**

City & State

28 **Merritt Island, FL**

Zip

29 **32952**

Country

30 **Brevard**

9. Name and Address of Current Registered Agent

**MORGAN, J L ESQ
1880 N. ATLANTIC AVENUE
SUITE 615
COCOA BEACH FL 32931**

10. Name and Address of New Registered Agent

81 Name

MORGAN LAUR REINMAN, ESQ.

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

335 S. Plumosa Street

83

Suite D

84 City

Merritt Island, FL

FL

85 Zip Code

32952

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

Morgan L Reinman **President**

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 **D** ☐ DELETE

NAME **LAUR, MORGAN J ESQ.**
STREET ADDRESS **1880 N. ATLANTIC AVENUE SUITE 615**
CITY-ST-ZIP **COCOA BEACH FL**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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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 **President** ☒ Change ☐ Addition

1.2 NAME **Reinman, Morgan Laur**

1.3 STREET ADDRESS **335 S. Plumosa Street Suite D**

1.4 CITY-ST-ZIP **Merritt Island, FL 32952**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

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 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:

Morgan L Reinman

4-13-98 407/459-2994

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01130627

CR2E034 (10/97)