FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000012383 (2)**

1. Corporation Name

RS - COSMOPOLITAN RESIDENCE, INC.

Principal Place of Business	Mailing Address
904 LEE BLVD. SUITE 102/103 LEHIGH ACRES FL 33936	904 LEE BLVD. SUITE 102/103 LEHIGH ACRES FL 33936

3. Date Incorporated or Qualified: 02/14/1995
3a. Date of Last Report:

2. Principal Place of Business (21): (same)
Suite, Apt. #, etc. (22):
City & State (23):
Zip (24): Country (25):

2a. Mailing Address (26): (same)
Suite, Apt. #, etc (27):
City & State (28):
Zip (29): Country (30):

4. FEI Number: 65-0571954 ☐ 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

ROYSTON, ROBERT D
12670 NEW BRITTANY BLVD.
#101
FT MYERS FL 32301

10. Name and Address of New Registered Agent

81 Name: Mr. Garey F. Butler
82 Street Address (P.O. Box Number(s) Not Acceptable): c/o Humphrey & Knott, P.A.
83: 1625 Hendry Street, P.O Box 2449
84 City: Fort Myers FL 85 Zip Code: 33902-2449

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: Garey F. Butler, Garey F. Butler 1-19-96
Signature, type or print name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SCHROLL, ROBERT 904 LEE BLVD., STE. 102/103 LEHIGH ACRES FL 33936 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P, D, Robert Schroll 904 Lee Blvd, STE 102/103 Lehigh Acres, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVST PFEIFFER, JOHANN M 904 LEE BLVD., STE. 102/103 LEHIGH ACRES FL 33936 ☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D, VP Wilhelm Wittmann 904 Lee Blvd, STE. 102/103 Lehigh Acres, FL 33936	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S Martina Jacob 904 Lee Blvd., STE 102/103 Lehigh Acres, FL 33936	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T Ingrid Wittmann 904 Lee Blvd., STE 102/103 Lehigh Acres, FL 33936	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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] 1/19/96 941-369-1710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #