

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90024 038 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P95000013306			
1. Entity Name REITES CARPENTRY, INC.			
Principal Place of Business 3560 7TH AVE SW NAPLES, FL 34117 US		Mailing Address 3560 7TH AVE SW NAPLES, FL 34117 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0558634		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
REITES, BARRY F 3560 7TH AVE SW NAPLES, FL 34117		Name <u>Adam E. Reites</u> Street Address (P.O. Box Number is Not Acceptable) <u>3560 - 7th Ave. S.W.</u> <u>Naples, FL. 34117</u> City <u>FL</u> Zip Code	
8. The above named entity, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u>Adam Reites - President</u> 2/7/05 Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when submitting)			
FILE NOW!!! - FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE ☒ Delete NAME STREET ADDRESS CITY-ST-ZIP	P REITES, BARRY F 3560 7TH AVE SW NAPLES, FL 34117	TITLE ☒ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	President Adam E. Reites 3560 - 7th Ave. S.W. Naples, FL 34117
TITLE ☒ Delete NAME STREET ADDRESS CITY-ST-ZIP	S REITES, RHONDA M 3560 7TH AVE SW NAPLES, FL 34117	TITLE ☒ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	Vice President Patrick A. Reites 461-13th St. N.W. Naples, FL 34117
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	VP - President REITES, ADAM F 3793 HUDSON CT NAPLES, FL 34118	TITLE ☐ Change ☒ Addition NAME STREET ADDRESS CITY-ST-ZIP	James A. Reites 3727 Recreation Ln. Sec/Trea Naples, FL. 34117
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP	TR - V.P. REITES, PATRICK A 461 13TH STREET N.W. NAPLES, FL 34120	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Adam Reites, Pres</u> 2/7/05 239-455-4782 Signature and typed or printed name of signing officer or director			

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