

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **P95000032186 (5)**

1. Corporation Name

**R.J. GEISLER REALTY, INC.**



Principal Place of Business Mailing Address

**15 CROSSROADS PLAZA BOX #140  
SARASOTA FL 34239**

**15 CROSSROADS PLAZA BOX #140  
SARASOTA FL 34239**

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**2a. Mailing Address**

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip

**28** Zip

**24** Country

**29** Country

**30** Zip

9. Name and Address of Current Registered Agent

**GEISLER, R J  
15 CROSSROADS PLAZA BOX #140  
SARASOTA FL 34239**

|  |  |                                  |                                  |   |
|--|--|----------------------------------|----------------------------------|---|
| 3. Date Incorporated or Qualified            | 4. FEI Number                                      | 5. Certificate of Status Desired | 6. Election Campaign Financing   | 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes |
| <b>04/25/1995</b>                            | <b>65-0576740</b>                                  | <input type="checkbox"/>         | <input type="checkbox"/>         | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                     |
| First  |  | 8. Date of Last Report           | 9. Applied For<br>Not Applicable |   |
|  |  | <b>NA</b>                        |                                  |   |
| 10. Name and Address of New Registered Agent |  |                                  |                                  |   |
| 81   | Name   |                                  |                                  |   |
| 82   | Street Address (P.O. Box Number is Not Acceptable) |                                  |                                  |   |
| 83   |  |                                  |                                  |   |
| 84   | City <b>FL</b> 85 Zip Code                         |                                  |                                  |   |

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 |                     | 13.                      | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
| <b>1. TITLE</b>            | <b>2. NAME</b>      | <b>3. STREET ADDRESS</b> | <b>4. CITY-ST-ZIP</b>                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>NAME</b>                | <b>GEISLER, R J</b> | <b>722 SIESTA DRIVE</b>  | <b>SARASOTA FL 34242</b>                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>STREET ADDRESS</b>      |                     |                          |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>CITY-ST-ZIP</b>         |                     |                          |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>1. TITLE</b>            | <b>2. NAME</b>      | <b>3. STREET ADDRESS</b> | <b>4. CITY-ST-ZIP</b>                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| <b>CITY-ST-ZIP</b>         |                     |                          |   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *R.J. Geisler*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Apr 23 1996*

Date

Daytime Phone #

CR2E034 (12/95)