

2002 UNIFORM BUSINESS REPORT (UL-1)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90174 029 ***150.00

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DOCUMENT # P95000078827

1. Entity Name

THOMAS R. HERTER COMPANIES, INC.

Principal Place of Business

**134 NW 16TH STREET
 SUITE 8
 BOCA RATON FL 33432
 US**

Mailing Address

**C/O REX ACCT. SER INC
 3452 W BOYNTON BCH BLVD STE 10
 BOYNTON BEACH FL 33436
 US**



2. Principal Place of Business

18950 US HWY 441 #125

3. Mailing Address

Suite, Apt. #, etc.

City & State

MT DORA, FL

City & State

Zip

32757

Country

Zip

Country

4. FEI Number

65-0614277

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

THOMAS R. HERTER

134 NW 16TH ST

STE 8

BOCA RATON FL 33432

Address Change →

7. Name and Address of New Registered Agent

Name

Thomas R Herter

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

18950 US HWY 441 #125

City

MT. DORA

FL

Zip Code

32757

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.

SIGNATURE

Thomas R Herter

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04-04-02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	SD	<input type="checkbox"/> Delete
NAME	TRACK, CHRISTIAN M	
STREET ADDRESS	11 LETHINGTON ROAD	
CITY-ST-ZIP	WEST PALM BEACH FL 33418	
TITLE	D	<input type="checkbox"/> Delete
NAME	HERTER, THOMAS R	
STREET ADDRESS	134 NW 16TH ST STE 8	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	TD	<input type="checkbox"/> Delete
NAME	REX, JR, R.R.	
STREET ADDRESS	3452 W BOYNTON BCH BLVD STE 10	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	18950 US HWY 441 #125
CITY-ST-ZIP	MT DORA, FL 32757
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R.R. Rex, Jr
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/29/02

Daytime Phone #

CR2E034 (9/01)