

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

FILED
Sep 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000029918

1. Corporation Name
Peter Schmidt, INC.

Principal Place of Business: Naples, Florida
Mailing Address: Baker Center, Suite 200
201 8th St. So.
Naples, Fla. 34102
40 Tom TRETTS

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Naples, Fla.
22 Suite, Apt. #, etc. 200 Baker Center
23 City & State Naples, Fla.
24 Zip 34102 25 Country USA

2a. Mailing Address
26 201 8th St. So.
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

3. Date Incorporated or Qualified April 5, 1996 12:13 PM
4. FEI Number 65-0681877
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 Intangibles Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Thomas T. Tretts, Jr.
505 21st Ave. South
Naples, Fla. 34102

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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, Sect on 607.0505, Florida Statutes.

SIGNATURE _____ (Type or print name of registered agent and date of appointment) (Type or print name of agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE President
NAME Peter Schmidt
STREET ADDRESS Galleon Drive #649
CITY-STATE-ZIP Naples, Fla. 34102
TITLE Vice-President/Treasurer
NAME Frederick Karl
STREET ADDRESS Galleon Drive #649
CITY-STATE-ZIP Naples, Fla. 34102
TITLE Thomas Tretts, Jr.
NAME Secretary
STREET ADDRESS 505 21st Ave. So.
CITY-STATE-ZIP Naples, Fla. 34102
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

600002638946
-09/14/98--01142--003
***150.00

14. I hereby certify that the information supplied was true and correct for the exemption stated in Section 119.07(3)(b) 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. 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 of this document, or on an attachment with an address.

SIGNATURE: _____ 8-28-98 941-263-0847

CR2E034 (10/97)

②

**THOMAS TRETTIS
ATTORNEY AT LAW**

Heritage Court, Suite 200
5020 Tamiami Trail North
Naples, Florida 33942

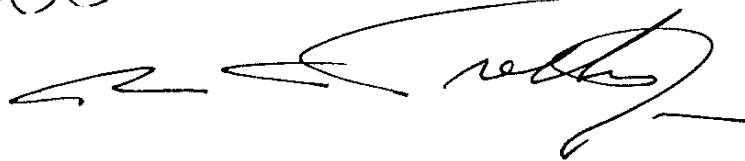
941-649-8266 Telephone
941-649-7321 Fax

4-29-98

Enclosed is my check for \$150⁰⁰ for
Peter Schmidt, Inc.

As noted there was no corporate
income in 1997 (or 1998).

P96000029918



Don Sanden:

8-30-98

Enclosed is the Annual Report Form I received
on Aug. 9, 1998.

Thank you,

