

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000031301	
1. Entity Name C. H. FROG REAL ESTATE AND MANAGEMENT CO.	

Principal Place of Business 37 ST JAMES DR PALM BEACH GARDENS, FL 33418	Mailing Address 37 ST JAMES DR PALM BEACH GARDENS, FL 33418
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DO NOT WRITE IN THIS SPACE

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01162004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0675931	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**JACKENTHAL, HERBERT
37 ST JAMES DR
PALM BEACH GARDENS, FL 33418**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	U00000067475 02/27/04-80001-013 158.75
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10. OFFICERS AND DIRECTORS

TITLE P	JACKENTHAL, CATHERINE
NAME	
STREET ADDRESS	37 ST JAMES DR
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418
TITLE D	JACKENTHAL, HERBERT
NAME	
STREET ADDRESS	37 ST JAMES DR
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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IN THIS SPACE**

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 officers empowered.

SIGNATURE: *Herbert Jackenthal* *2/23/04* *561-627 3148*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #