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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000018356 (0)

REICHARD & REICHARD, INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing	Mailing Address					T 1891/1801 (10 1911) 1981) BRIN BRIN BRIN BRIN BRIN BRIN BRIN HIBD HIBD BIND BRIND					
422 CAPE CO	RAL PKWY. WEST	422 CA	422 CAPE CORAL PKWY. WEST				İ						
CAPE CORAL FL 33914		CAPE C	CAPE CORAL FL 33914				l	DO NOT WRITE IN THIS SPACE					
							-	Date Inco	orporated or 0		IN THIS	- ACL	
									,	adamod			
2. Principal P	lace of Business	2a, Maili	2a. Mailing Address					02/21/1997 4. FEI Number Applied For					
21		26	——————————————————————————————————————					65 -	073	308	34		Not Applicable
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.										Additional
22		27						. Certificati	e of Status D	esireo	<u> </u>	Fee	Required
City & State	ə	City	City & State				•	6. Election Campaign Financing \$5.00 May Be					
3		28	<del></del>					Trust Fun	d Contributio	n		Adde	d to Fees
Zip	Country	Zip			untry		€	•	oration owes	•			_ `
24		25   29   30   Name and Address of Current Registered Agent			T		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent						
		Current Negistereu	Agoin		81	Name		U. Name an	iu Audiess C	I HOW NO	Aisteran	Maur	
REICHARD, JACK A						THAITIO					_		
	CAPE CORAL PKWY. W	EST				Street	Address (P.O. Box Number is Not Acceptable)						
UAI	PE CORAL FL 33914								<del></del>				
					83								
					84	City			•		FL	<b>85</b> Zi	p Code
11. Pursuant i	to the provisions of Sections	607 0502 and 607 150	ns. Florida Statute	s the e	hove	-named	corporati	ion submits	this statemer	ot for the r		f changing	its registered
office or re	egistered agent, or both, in the familiar with, and accopt the	he State of Florida. Su	ch change was a	uthorize	ed by	the corr	poration's	board of di	rectors. I her	eby accer	of the app	pointment	as registered
	m татпінат with, and ассорі п	ne obligations or, Sect	1011 607.0505, FRO	rida Sia	lules	•							
SIGNATURE	Signature typed or printed name of reg	stered agent and title if applic	able (NOTE	Angistere	d Ager	n signature	required who	en reinstaling)			DATE		
12.	OFFIC	ERS AND DIRECTORS	3	13.			· · · · · · · · · · · · · · · · · · ·	ADDITION	S/CHANGES	TO OFFIC	ERS AND	DIRECTO	DRS IN 12.
TITLE	D		☐ DELETE	1.1 10	ITLE		P					Change	Addition
NAME	reichard, Jack a			1.2 N	AME		' '						
STREET ADDRESS	422 CSAPE CORAL PH	KWY WEST	1.3 \$			ADDRESS							
CITY-ST-ZIP	CAPE CORAL FL 3391	4		1.4 0	1TY-S1	- ZIP							
TITLE	D		DELETE	2.1 1	ITLE		5,7	Γ				L Change	Addition
NAME	REICHARD, GLORIA H			2.2 N	AME						_		ļ
STREET ADDRESS	422 CSAPE CORAL PH			2.3 \$	TREET	ADDRESS							
CITY-ST-ZIP	CAPE CORAL FL 3391	4		-1	CITY-S	1 - ZIP		<del></del>			<del></del>		
TITLE			DELETE	3.1 ∏								☐ Change	Addition
NAME				32 N									
STREET ADDRESS						ADDRESS							ļ
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NAME CIDELY ADDRESS				4.2 N		0000000							
STREET ADDRESS						ADDRESS	1						ļ
CITY-ST-ZIP TITLE			DELETE	5.1 T	TIY-ST	- 212						Change	Addition
NAME				5.2 N									
STREET ADDRESS						ADDRESS							
CITY-ST-ZIP					ITY-ST								
TITLE	4.5		DELETE	6.1 TI		£11			<del></del>			Change	Addition
NAME				6.2 N									
STREET ADDRESS						NDDRESS							
CITY-ST-ZIP				4	ITY-ST								
				J. 7 D.	٧1								

14. Thereby 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 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.

CIONATURE.

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Jane A Frein hand

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