

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 22, 2004 8:00 am
Secretary of State

06-22-2004 90002 012 ***150.00

DOCUMENT # P97000107516

1. Entity Name

J.P. REICHARD III ENTERPRISES INC.



Principal Place of Business

7601 W. LAKE DR.
WEST PALM BEACH, FL 33406

Mailing Address

7601 W. LAKE DR.
WEST PALM BEACH, FL 33406

04058434



03182003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3261857

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REICHARD, JOHN P III
7601 WEST LAKE DR.
WEST PALM BEACH, FL 33406

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6/10/04

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	REICHARD, JOHN P
STREET ADDRESS	7601 WEST LAKE DR.
CITY-ST-ZIP	W. PALM BCH, FL 33406
TITLE	VP
NAME	REICHARD, SHEILA
STREET ADDRESS	7601 W. LAKE DRIVE
CITY-ST-ZIP	WEST PALM BEACH, FL 33406
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/04

Date

(561) 968-9716

Daytime Phone #