

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P99000099507

1. Entity Name
CHARLES RUTENBERG REALTY ASSOCIATES, INC.



Principal Place of Business
1545 S. BELCHER RD.
CLEARWATER, FL 33764

Mailing Address
1545 S. BELCHER RD.
CLEARWATER, FL 33764

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07032008

Chg-P

CR2E034 (12/06)

4. FEI Number
59-3609711

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NESTOR, JOANN
1545 S. BELCHER RD.
CLEARWATER, FL 33764

7. Name and Address of New Registered Agent

Name

James A. Staack

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

900 Drew Street, Suite 1

City

Clearwater,

FL

Zip Code

33755

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 re-appointing)

7/10/08
DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
NESTOR, JOANN
1545 S BELCHER RD
CLEARWATER, FL 33764 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
John Rurkowski
1545 S. Belcher Rd.
Clearwater, FL 33764 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
000133267980
07/22/08--01014--002 **122.50

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

John Rurkowski

7/10/08

Daytime Phone #

727-538-9200 x4

FILED
08 JUL 14 PM 1:17
STATE
TALLAHASSEE, FLORIDA

