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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # S22979

1. Corporation Name

ROGERS REAL ESTATE SCHOOL, INC.

FILED Mar 04, 1999 8:00 am Secretary of State 03-04-1999 90260 048 ***150.00



Principal Place of Business Mailing Address							, BIBTI WINIT BINTI I	91411 1 1211 1461	
2106 NW 13TH STREET GAINESVILLE FL 32609		2106 NW 13TH STREET GAINESVILLE FL 32609				DO NOT WRITE IN TH	IS SPACE		
						3. Date Incorporated or Qualifed			
						01/02/1991		ĺ	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For	
21		26				59-3043006	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	1	
22		27				J. Certificate of States Bookes	Fee Re	equired	
City & State	•	City & State				6. Election Campaign Financing	~ - · · · ·	May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip ─_	Country	Zip	Cou	ntry		8. This corporation owes the current year I	ntangible Yes	™ No	
24	25		0	, -		Personal Property Tax. 10. Name and Address of New Registere		300	
	9. Name and Address of Curren	it Registered Agent		81	Name	TO. INGINE SING ACCUSES OF NOW INEGISTRIC	a rigant		
ROG	ERS, RICHARD F. JR.				•				
	NW 13TH STREET			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		}	
	IESVILLE FL 32609			83					
4-				ĹĹ					
				84	City	F	85 Zip	Code	
Office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was aut	honzec	i by th	named corpo e corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its ointment as re	registered egistered	
SIGNATURE					-	when reinstating) DATE			
12.	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: F	13.	Agents	agnature required	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12	Ś
TITLE	DV	DELETE	1.1 TI	TLE			Change	Addition	
NAME	ROGERS, RICHARD F.		1.2 NAME					1	;
STREET ADDRESS	1802 NW 10TH TERRACE		1.3 ST	REETA	DDRESS				ì
CITY-ST-ZIP	GAINESVILLE FL		1.4 CI	TY-ST-2	ZIP			\	č
TITLE	DV	☐ DELETE	2.1 TI				Change	☐ Addition	(
NAME	ROGERS, MILDRED W.		2.2 N/	AME	İ				
STREET ADDRESS	1802 NW 10TH TERRACE		2.3 \$1	REET A	DDRESS			}	
CITY-ST-ZIP	GAINESVILLE FL		2.4 C	ITY-ST-	ZIP				
TITLE	DP	☐ DELETE	3.1 ∏	TLE	-" l		Change	☐ Addition	
NAME	ROGERS, RICHARD F. JR.		3.2 NA	AME:				Ì	
STREET ADDRESS	1724 SE 48TH TERRACE		3.3 ST	REETA	DORESS			ļ	
CITY-ST-ZIP	GAINESVILLE FL		34.C	ITY-ST-	ZIP				
TITLE		☐ DELETE	4.1 77	TLE			Change	☐ Addition	
NAME			4. 2 N	AME				1	
STREET ADDRESS			4.3 S1	TREET A	DDRESS			İ	
CITY-ST-ZIP		C) por ETE	-	TY-ST.	ZIP		[] Change	Addition	
TITLE		☐ DELETE	5.1 Tf 5.2 N/				□ cuande		
NAME					DOBESS				
STREET ADDRESS			•		DDRESS			ł	
CITY-ST-ZIP		☐ DELETE	6.1 TI	TY-ST-	417		Change	Addition	
TITLE		☐ DELETE	6.2 N				∟ onange	[-] , 100mon	
NAME					DDRESS				
STREET ADDRESS				TY-ST-	1		•	ì	

14. 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 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, with all other like empowered.