

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S67859 (6)

1. Corporation Name

ROCHELLE DEVELOPMENTS, INC.



Principal Place of Business

P. O. BOX 512  
HOMOSASSA SPRINGS FL 32647

Mailing Address

700 YORK STREET  
LONDON ON N5W 2-8  
US

3. Date Incorporated or Qualified  
07/22/1991

3a. Date of Last Report  
04/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

N5W 2S8

30

CANADA

4. FEI Number  
59-3084903

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ABBOTT, GLEN C.  
521 W. FORT ISLAND TRAIL  
SUITE A  
CRYSTAL RIVER FL 32629

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
706 N. SUNCOAST BOULEVARD

83

84 City  
CRYSTAL RIVER

FL

85 Zip Code  
34429

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME SPEICHT, STEVEN  
STREET ADDRESS 700 YORK STREET  
CITY-ST-ZIP LONDON ONTARIO CA

1.1 TITLE D ☒ Change ☐ Addition  
1.2 NAME SPEICHT, STEVEN  
1.3 STREET ADDRESS 700 YORK STREET  
1.4 CITY-ST-ZIP LONDON, ONTARIO, CA

TITLE DPS ☒ DELETE  
NAME STECHT, CHRIS  
STREET ADDRESS 700 YORK STREET  
CITY-ST-ZIP LONDON ONTARIO CA

2.1 TITLE DPS ☒ Change ☐ Addition  
2.2 NAME SPEICHT, CHRIS  
2.3 STREET ADDRESS 700 YORK STREET  
2.4 CITY-ST-ZIP LONDON, ONTARIO, CA

TITLE VP ☐ DELETE  
NAME SPEICHT, FRITZ  
STREET ADDRESS 700 YORK STREET  
CITY-ST-ZIP LONDON ON

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

CHRIS SPEICHT

APRIL 10, 1996

(519)438-3691

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)