

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 # **V54754** (9)

1. Corporation Name

GEORGE REBHOLZ AND ASSOCIATES, INC.



Principal Place of Business

**520 RIVIERA DRIVE
NAPLES FL 33940-4129**

Mailing Address

**520 RIVIERA DRIVE
NAPLES FL 33940-4129**

3. Date Incorporated or Qualified
07/28/1992

3a. Date of Last Report
03/08/1995

2. Principal Place of Business

21 **11939 North Lake Drive**

2a. Mailing Address

26 **11939 North Lake Drive**

4. FEI Number
65-0350341

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 **Boynton Beach**

City & State

28 **Boynton Beach**

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 **33436**

25 **Palm Beach**

29 **33436**

30 **Palm Beach**

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

**REBHOLZ, GEORGE E
520 RIVIERA DRIVE
NAPLES FL 33940**

81 Name

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

11939 North Lake Drive

83

84 City **Boynton Beach**

FL

85 Zip Code

33436

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, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ DELETE

NAME **D**
REBHOLZ, GEORGE E
STREET ADDRESS **520 RIVIERA DRIVE**
CITY-ST-ZIP **NAPLES FL 33940**

2. TITLE ☐ DELETE

NAME **D**
REBHOLZ, JOANNE O
STREET ADDRESS **520 RIVIERA DRIVE**
CITY-ST-ZIP **NAPLES FL 33940**

3. TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE: **George E. Rebholz** 1-30-96 407 738 7407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)