

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90042 020 ***150.00

DOCUMENT # V54754

1. Entity Name
GEORGE REBHOLZ AND ASSOCIATES, INC.



Principal Place of Business
**3362 SE CASCADIA WAY
HOBE SOUND FL 33455
US**

Mailing Address
**3362 SE CASCADIA WAY
HOBE SOUND FL 33455
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

Zip

Country

Zip

Country

4. FEI Number **65-0350341**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**REBHOLZ, GEORGE E
5740 SE WINGID FOOT DRIVE
STUART FL 34997**

Name: **Same**
Street Address (P.O. Box Number is Not Acceptable): **3362 SE Cascadia Way**
City: **Hobe Sound** **FL** Zip Code: **33455**

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 George E Rebholz (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **REBHOLZ, JOANNE O**
STREET ADDRESS **4248 SE COVE LAKE CIRCLE STE 104**
CITY-ST-ZIP **STUART FL 34997**

☒ Change ☐ Addition
NAME **3362 SE Cascadia Way**
STREET ADDRESS **Hobe Sound, FL 33455**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **REBHOLZ, GEORGE E**
STREET ADDRESS **4248 SE COVE LAKE CIRCLE STE 104**
CITY-ST-ZIP **STUART FL 34997**

☒ Change ☐ Addition
NAME **3362 SE Cascadia Way**
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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: George E Rebholz **1-7-03 772 546 0499**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)