### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000009875

Entity Name: RE-AL, INC.

# **Current Principal Place of Business:**

18125 US 41 NORTH UNIT 102 LUTZ, FL 33549

# **Current Mailing Address:**

18125 US 41 NORTH UNIT 102 LUTZ, FL 33549

## FEI Number: 27-3710844

### Name and Address of Current Registered Agent:

WILMOUTH, JIM 18125 US 41 NORTH UNIT 102/103 LUTZ, FL 33549 US

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.

The above named		s registered onice of regis	tered agent, or both, in the State of Th	onda.
SIGNATURE				03/23/2021
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	TREASURER	Title	VC	
Name	WILMOUTH, JAMES	Name	LIVESAY, PATRICK J	
Address	18125 US 41 NORTH UNIT 102/103	Address	18125 US 41 NORTH UNIT 102/103	
City-State-Zip:	LUTZ FL 33549	City-State-Zip:	LUTZ FL 33549	
Title	DIRECTOR	Title	CHAIRMAN	
Name	COLLIN, ALEX M	Name	JAMES WILMOUTH	
Address	18125 US 41 NORTH UNIT 102/103	Address	18125 US 41 NORTH UNIT 102/103	
City-State-Zip:	LUTZ FL 33549	City-State-Zip:	LUTZ FL 33549	
Title	DIRECTOR			
Name	BAILEY, GLORIA			
Address	18125 ROUTE 41 NORTH UNITS 102/103			
City-State-Zip:	LUTZ FL 33549			

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

### SIGNATURE: JAMES R. WILMOUTH

CHAIRMAN / TREASURER 03/23/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

Date