

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000009875

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**Certificate of Status Desired:** Yes**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.***SIGNATURE:** JIM WILMOUTH

07/14/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name WILMOUTH, JAMES
Address 18125 US 41 NORTH
 UNIT 102/103
City-State-Zip: LUTZ FL 33549

Title VC
Name LIVESAY, PATRICK J
Address 18125 US 41 NORTH
 UNIT 102/103
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name COLLIN, ALEX M
Address 18125 US 41 NORTH
 UNIT 102/103
City-State-Zip: LUTZ FL 33549

Title CHAIRMAN
Name REPANTI, MICHAEL
Address 18125 US 41 NORTH
 UNIT 102
City-State-Zip: LUTZ FL 33549

Title SECRETARY
Name BAILEY, GLORIA
Address 18125 ROUTE 41 NORTH
 UNITS 102/103
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name PETERSON, DALE
Address 18125 US 41 NORTH
 UNIT 102
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name KLLOEBER, RUSSELL
Address 18125 US 41 NORTH
 UNIT 102
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

TREASURER

07/14/2022

Electronic Signature of Signing Officer/Director Detail

Date