FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State Country Zip Country Zip Country Zip Country Registered Contribution City & Country Zip Country Registered Contribution City &
Principal Place of Business 3886 CLEVELAND AVE P.O. BOX 948 PORT MYERS FL. 33902-0648 US SUB-PRINCIPAL PRINCIPAL PRI
398 CLEVELAND AVE P.O. BOX 488 P.O. BOX 188
Soci CLYPLAND AVE P.O. 500 Keg
P.O. 90/ 68 P.O. 50/ 68 P.O. 5
US 3, Date Incorporated or Qualified 11/01/1970 21 11/01/1970 22 24, Mailing Address 4, FEI Number Applied For 11/01/1970 Applied For
2. Principal Place of Business
2. Principal Place of Business 2. Malking Address 4. FEI Number Applied For Not Applicable Suite, Apt. 4, etc. 5. Suite, Apt. 4, etc
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. So. Certificate of Status Desired \$6.75 Additional Fee Required City & State City & State City & State Country Zip Country Added to Fees Added to Fee
27 City & State
City & State Country Zip
Zip Zip Zip Zip Zip Country Zip Country B, This corporation was not have paid the current year Intanglisle Personal Property Tax die June 20 Zip So No B, This corporation owes or has paid the current year Intanglisle Personal Property Tax die June 20 Zip No Description of the provisions of Section 607 doors No Street Address of New Registered Agent Signature types of Changing its registered agent. In MERS FL 33919 Street Address (P.O. Box Number is Not Acceptable) Signature types of Changing its registered agent. In the provisions of Sections 607 doors, Provided Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In the provisions of Sections 607 doors, Provided Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In the purpose of Changing its re
Zip Country Zip Country 29 39 30 Personal Country Size Country Size Country Size Size Size Size Size Size Size Size
24
MESSMER, RICHARD P. 106 PLACID DRIVE FT. MYERS FL 33919
TI. Pursuant to the provisions of Sections 607.0502 and 607 1508, Florida Statutes, the comporation submits this statement for the purpose of changing its 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, and familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. The observation of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and time if applicable. (NOTE Registered Agent lagnature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILLE MAKE SIREET ADDRESS STRELLIS LN 1.3 STREET ADDRESS STR
FT. MYERS FL 33919 83 84 City FL 85 Zip Code 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 agent and familiar with, and accept the obligations of, Section 607.6505, Florida Statutes. SIGNATURE Signature hybod or printed name of registered agent and title it applicable. (NOTE Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CD CHANGE STREET ADDRESS CITY-S1-2P FT MYERS, FL 00000 14.CITY-S1-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17.TILE VD Change Addition MAKE SIREST ADDRESS SIR
B3 B4 City
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 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
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 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
SIGNATURE Signature typod or printed name of regisered agent and title if applicable (NOTE Registered Agent signature required when reinstating)
SIGNATURE Signature typod or printed name of regisered agent and title if applicable (NOTE Registered Agent signature required when reinstating)
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. OFFICERS AND DIRECTORS TITLE CD MESSMER, RUTH STREET ADDRESS CITY-ST-ZIP TITLE VD MESSMER, HEATHER STREET ADDRESS CITY-ST-ZIP FT. MYERS, FL DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS CITY-ST-ZIP TITLE VD MESSMER, HEATHER STREET ADDRESS CITY-ST-ZIP FT. MYERS FL DELETE 2.4 CITY-ST-ZIP TITLE PO MESSMER, RICHARD P STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE MESSMER, RICHARD P STREET ADDRESS CITY-ST-ZIP TO DELETE 3.1 TITLE MESSMER, RICHARD P 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition Addition MESSMER, RICHARD P 3.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition
NAME
STREET ADDRESS 5563 TRELLIS LN 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE
CITY-ST-ZIP
TITLE VD
MESSMER, HEATHER 22 NAME 23 STREET ADDRESS 1980 MARAVILLA AVENUE 23 STREET ADDRESS 2.4 City-st-zip 73 90 1
STREET ADDRESS 1960 MARAVILLA AVENUE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP Z-1P 3390
TITLE
NAME MESSMER, RICHARD P 3.2 NAME 3.3 STREET ADDRESS CITY-ST-ZIP TINLE DELETE DELETE 4.1 TINLE Change Addition
STREET ADDRESS 108 PLACID DR 3.3 STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME
NAME 4. 2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE DELETE 5.1 TITLE Change Addition
NAME 52 NAME
STREET ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS
CRTY-ST-ZIP 54 CRTY-ST-ZIP 54 CRTY-ST-ZIP Change Addition
NAME SCHARGE SOCIOS SAME SAME SAME SAME SOCIOS SAME SAME SAME SAME SAME SAME SAME SAM
STREET ADDRESS -02/23/9801002004

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 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 of kustee 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.

FILED

Feb 20 1998 8:00am