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PROFIT CORPORATION ANNUAL REPORT

1997

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NAME

STREET ADDRESS

appears in Block 12 or Block 13 if

City - St - ZiP



FLORIDA DEPARTMENT OF STATE

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Apr 14 1997 8:00am

Secretary of State

Addition

Channe

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J12890

(6)

SANIBEL RENTAL SERVICE. INCORPORATED

Principal Place of Business Mailing Address 2246 PERIWINKLE WAY 2246 PERIWINKLE WAY SANIBEL FL 33957 SANIBEL FL 33957-4010 3a, Date of Last Report 3. Date Incorporated or Qualified 05/01/1986 05/01/1996 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 59-2327076 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Z_{10} Country Zip 🔀 Yes 🔲 No Florida Statutes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RANDY S. FABER 6973 KIMBERLY TER 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33919 83 84 City 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 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 Sho after, typed or prededicanle of registered agent and title 4 applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) OFFICERS AND DIRECTORS 13. 12 Change Addition DELETE 11 TITLE THE BAUGHER, GARY D. 1.2 NAME NAME 6951 DEEP LAGOON LANE 1.3 STREET ADDRESS STREET ADDRESS FT. MYERS FL 1.4 CITY-ST-ZIP City - ST - ZIP Addition DELETE Change 2.1 TITLE THILE BAUGHER, JOAN 2.2 NAME NAME 6951 DEEP LAGOON LANE 2.3 STREET ADDRESS STREET ADDRESS FT. MYERS FL 2.4 CITY-ST-ZIP CITY - ST - ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE RANDY, FABER S. 3.2 NAME NAME 6973 KIMBERLY TERRACE 3.3 STREET ADDRESS STREET ADDRESS. FT. MYERS FL 3.4. CITY-ST-ZIP CHY-ST 20 Change Addition DELETE 4.1 TITLE 1 ILF 4. 2 NAME 4.3 STREET ADDRESS STREEL ADORESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 51 TITLE THE 5.2 NAME NAME **53 STREET ADDRESS** STREET ADDRESS 5.4 City - ST - ZiP CITY - S1 - ZiP

FRANKY S. FARER //10/97 941-473-5777

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

14. I do 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

DELETE