May 05, 1999 8:00 am Secretary of State

05-05-1999 90074 030 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # L84208

1. Corporation Name

MEYER-MANZ REAL ESTATE, INC.

Principal Place	of Business	Mailing Address						
1955 IMPERIAL	GC BLVD	1955 IMPERIAL GC BLVD						
NAPLES FL 3411		NAPLES FL 34110				DO MOT MURITE IN THIS SPACE		
US		US				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		i
						06/29/1990		
2. Principal Pl	ace of Business	2a. Mailing Address		,		4. FEI Number		Applied For
— `	000 01 00011000	26				65-0204416		Not Applicable
21	# oto	Suite, Apt. #, etc					\$8 7	Additional
Suite, Apt. i	#, etc.	<u> </u>	•			5. Certifcate of Status Desired	<b>,</b>	Required
22		27 City 9 State						
City & State	• '	City & State				6. Election Campaign Financing	• -	May Be
23		28	<u></u>			Trust Fund Contribution Added to Fees		
Zip	Country Zip		Country			8. This corporation owes the current year In		_
24	25 29 30			Personal Property Tax.				
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent	
				81	Name			
MANZ, JEFFREY H.			•					
	IMPERIAL G C BLVD		82 Street Add			idress (P.O. Box Number is Not Acceptable)		
	ES FL 34110							
NAPL	.ES PL 34110			83				1
				84	City		85 Zi	p Code
				64	City	FI	_   "   -	
44 Durayant	to the provisions of Sections 607 0502	and 607 1508 Florida S	Statutes the	above	-named con	poration submits this statement for the purpose of	f changing	its registered
office or re	egistered agent, or both, in the State o	i Florida. Such change v	vas autnorize	ועס ס	tne corporat	tion's board of directors. I hereby accept the appo	intment as	registered
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505	5, Florida Sta	tutes.				
SIGNATURE								
OIOI II II II	Signature, typed or printed name of registered agent	and title if applicable.	<u> </u>		t signature requir	red when reinstating) DATE		
12.	OFFICERS AND	<del></del>	13.	•		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	DELETE 1.1 TI		TILE			☐ Chang	je 🗌 Addition
NAME	MEYER-MANZ, VICKIE		IAME				i	
	· • • - · · · ·		TREET	ADDRESS			ļ	
STREET ADDRESS	l				į.			{
CITY-ST-ZIP	NAPLES FL 34110			1.4 CiTY-ST-ZIP 2.1 TITLE			☐ Chang	e Addition
TITLE	STD	€) DELE						,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME	MANZ, JEFFREY H.		2.2 NAME					J
STREET ADDRESS	1955 IMPERIAL G. C. BLVD	2.3 S		STREET	ADDRESS			Ì
CITY-ST-ZIP	NAPLES FL 34110	2.40		CITY-S	T-ZIP	<u></u>		
TITLE		☐ DELET	DELETE 3.1 TI				☐ Chang	ge Addition
	_		221	3.2 NAME				
NAME								}
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			CITY-S	T-ZIP				
TITLE		☐ DELET	ΓE 4.1 T	TITLE			Chang	ge
NAME			4.2	NAME				ļ
STREET ADDRESS			435	STREET	ADDRESS			
				CITY-ST		2		
CITY-ST-ZIP	and an establishment	☐ DELET	4.4 V	*****	- 21	<del></del>	Chang	ge Addition
TITLE	152	☐ AÉTE		5.1 TITLE 5.2 NAME			L_ 0.7511	
NAME	•							
STREET ADDRESS			5.3 8	STREET	ADDRESS			ļ
CITY-ST-ZIP			5.4 0	CITY-S1	T-ZIP			
TITLE		☐ DELE	TE 6.1	MLE			☐ Chan	ge 🔲 Addition
			6.21	MAME				1:
NAME					ADDRESS			'
STREET ADDRESS								ļ
CITY-ST-ZIP	,		6.4 (	CITY-ST	T-ZIP		_	·

14. 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 or trustee 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, pron an attachment with an address, with at other like empowered.

SIGNATURE:

CITY-ST-ZIP