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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

THE DRESSLER CORPORATION

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 100 ANCHOR DR 100 ANCHOR DR 440 KEY LARGO FL 33037 US 2. Principal Place of Business 2a. Mailing Addres			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 07/19/1985 4. FEI Number Applied For				
21		26			59-2556178		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	CO 75 Addis	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Countr 30	У	This corporation owes or has paid the Personal Property Tax due June 30.		tangible No
<u> </u>	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent	
	ESSLER, BRADLEY P		81	1 Name			
	O ANCHOR DR. #440		82	2 Street Add	dress (P.O. Box Number is Not Acceptable)	•	
KEY LARGO FL 33037			63				
			6				
			84	City		85 Zip (Code
agent I a SIGNATURE 12. TITLE	m familiar with, and accept the obligation of registered ages OFFICERS AND PD	ntions of, Section 607.0505, Flo	orida Statut€	96. gent eignature requ	ation's board of directors. I hereby accept the ADDITIONS/CHANGES TO OFFICERS. ADDITIONS/CHANGES TO OFFICERS.	E	
NAME STREET ADDRESS CITY-ST-ZIP	DRESSLER, BRADLEY P. 100 ANCHOR DRIVE #440 KEY LARGO FL		1.2 NAME 1.3 STREE 1.4 City-	ET ADDRESS			
TITLE		DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	- ST - ZIP			
TITLE		DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-	-ST-ZIP		Change	Addition
NAME			4.1 HILE 4. 2 NAME	.		L., Change	~vullion
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY -				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	•			
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY ST-ZIP		-	6.4 CITY-				
14. Nereby c	ertify that the information supplied wit on this equal report or supplemental	th this filing does not qualify for	or the exemp	ption stated in hat my signati	Section 119.07(3)(i), Florida Statutes. I furthe ure shall have the same legal effect as if made	r certify that the	information at I am an

rer or hustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in most with an address.