5. Certificate of Status Desired Fee City & State City & State 23 Ft. MYRKS FC 28 Lehigh ACYS FL Trust Fund Contribution Add Trust Fund Contribution Add Trust Fund Contribution Status Florida	t Report Lepon E Applied For Not Applicabl 5 Additional Required 10 May Be ed to Fees
Principal Place of Business 4106 W 3RD ST LEHCH ACRES FL 33971 3. Date Incorporated or Qualified 10/02/1995 17/11/2 S 1 10/02/1995 17/11/2 S 2. Principal Place of Business 1 10/02/1995 17/11/2 S 3. Date Incorporated or Qualified 10/02/1995 17/11/2 S 17/11/2 S 2. Mailing Address 2. Mailing Address 3. LEHCH ACRES FL 33971 3. Date Incorporated or Qualified 3. Date of Las 11/11/2 S 3. Date Incorporated or Qualified 3. Date of Las 11/11/2 S 3. Date Incorporated or Qualified 3. Date of Las 11/11/2 S 3. Date Incorporated or Qualified 3. Date of Las 11/11/2 S 5. Certificate of Status Besired 5. Certificate of Status Besired 5. Certificate of Status Besired 6. Election Campaign Financing 7. Fee 7. Fee 7. Fee 7. Fee 7. Country 8. This report of Las Status Besired 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name Address of New Registered Agent 12. Street Address (P.O. Bix Number is Not Acceptable) 13. Name Address of Date of Las Status S 14. Date of Las Status S 15. Certificate of Status Besired 15. Certificate of Status Session 16. Election Campaign Financing 18. Trust Fund Contribution 19. Name Address of New Registered Agent 19. Street Address (P.O. Bix Number is Not Acceptable) 19. Street Address (P.O. Bix Number is Not Acceptable) 19. Street Address (P.O. Bix Number is Not Acceptable) 19. Street Address (P.O. Bix Number is Not Acceptable) 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of Sections Statutes 19. Street Address of Process of Contribution of S	t Report Lepon E Applied For Not Applicabl 5 Additional Required 10 May Be ed to Fees
## 105 W 3RD ST LEHIGH ACRES FL 33971 ## 105 W 3RD ST LEHIGH ACRES FL 33971 3. Date Incorporated or Qualified 3a. Date of Las 10/02/1995 17/14/14 R 2 17/15	t Report Lepon E Applied For Not Applicabl 5 Additional Required 10 May Be ed to Fees
LENGH ACRES FL 33971 LENGH ACRES FL 33971	Applied For Not Applicable 5 Additional Required 00 May Be ed to Fees
Principal Place of Business 10/02/1995 Initial R 28. Mailing Address 28. Mailing Address 4. FEI Number 65 OG 18.350 5. Certificate of Status Desired 58.7 50 OF 18.350 5. Certificate of Status Desired 58.7 5. Certificate	Applied For Not Applicable 5 Additional Required 00 May Be ed to Fees
Principal Place of Business 1. Luther Kind 2a. Mailing Address 26 MIOS 3MI St. WeSt 6 OG 13350 Suite, Apt. #, etc. 5. Certificate of Status Desired 58.7. Service, Apt. #, etc. 5. Certificate of Status Desired 58.7. Fee City & State 7. Country 8. The Country 8. This proposition has liability for intenglible tax under Florida Statutes 6. Election Campaign Financing 6. Sc. Certificate of Status Desired 6. Election Campaign Financing 6. Sc. Certificate of Status Desired 6. Election Campaign Financing 7. Sc. Country 8. This proposition has liability for intenglible tax under Florida Statutes 7. Sc. Certificate of Status 8. This corporation has liability for intenglible tax under Florida Statutes 7. Sc. Certificate of New Registered Agent 8. This corporation has liability for intenglible tax under Florida Statutes 7. Sc. Certificate of New Registered Agent 8. This corporation has liability for intenglible tax under Florida Statutes 7. Sc. Certificate 6. Election Campaign Financing 7. Sc.	Applied For Not Applicabl 5 Additional Required 00 May Be ed to Fees
Suite, Apt. #, etc. Suite Apt. #, etc.	5 Additional Required 00 May Be ed to Fees
State City & State City & State City & State Country Zip Country Zip Country Zip Country Zip State Country Zip State Country Zip State Country Zip State Zip	Required May Be ed to Fees
City & State City & State City & State City & State City & State Ft. Myers Ft. 28 Lehigh acres Ft. State Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip State Zip 3 9 7 7 30 Le Lehigh acres State Country Zip State Zip Zip State Zip State Zip State Zip State Zip Zip State Zip	ed to Fees
21p Country Zip Country Zip Country Zip Country Single Single Country Single Country Single Country Single Country Single Country Single Sing	
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ### 105 Hz 32 09 50000000000000000000000000000000000	
ELIZEE, BERNARD F 4105 W 3RD ST LEHIGH ACRES FL 33971 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment agent. I am jamilar with, and accept the obligations of, Section 617.0503, Florida Statutes. 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment agent. I am jamilar with, and accept the obligations of, Section 617.0503, Florida Statutes. 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment agent. I am jamilar with, and accept the obligations of, Section 617.0503, Florida Statutes. 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment agent. I am jamilar with, and accept the purpose of changing office or registered agent, and three provisions of Section 617.0503, Florida Statutes. 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. The purpose of changing office or registered agent, and three provisions of Section 617.0503, Florida Statutes, the above-named corporation is board of directors. The purpose of changing office or registered agent and three purpose of changing office or registered agent and three purpose of changing office or registered agent and three purpose of changing office or registered agent and three purpose of changing office or registered agent agent and three purpose of changing office or registered agent a	I 27
ELIZEE, BERNARD F 4105 W 3RD ST LEHIGH ACRES FL 33971 82 Street Address (P.O. Bix Number is Not Acceptable) 83 Compare the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment a agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. IGNATURE BEYTICK WITE Registered Agent signature required when reinstating) OATE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-SI-ZIP DELETE DELETE DELETE DELETE DELETE 11 TITLE Beynard Fe/ix Elizee Changes 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP Billy Poole 2.1 TITLE Billy Poole 2.2 NAME 2.3 STREET ADDRESS 3.2 D9 SOUth Street TY-SI-ZIP Ft. My 2 h S. FL. 33 9 0 2	C. L. E.
LEHIGH ACRES FL 33971 84 City City City City City City City City	
1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 a agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. IGNATURE GRATURE	1 . 2
1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 a agent, a minimilar with, and accept the obligations of, Section 617.0503, Florida Statutes. BEYPTARY F-RIX Flizer OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS INC. AMME 12. NAME 13. STREET ADDRESS 14. CITY-SI-ZIP DELETE DELETE DELETE DELETE DELETE DELETE 21. TITLE DELETE DELETE 14. CITY-SI-ZIP DELETE 21. TITLE DELETE DELETE 33. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. CITY-SI-ZIP DELETE DELETE DELETE DELETE 21. TITLE DELETE DELETE DELETE DELETE 21. TITLE DELETE DELETE DELETE DELETE 21. TITLE DELETE DELETE	ip Code
BETT AT LESS CONTROLLE BETT AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS INTE DELETE DELETE 1.1 TITLE DELETE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS DITTLE DELETE DELETE DELETE DELETE DELETE 1.4 CITY-SI-ZIP DELETE DELETE DELETE DELETE DELETE 2.1 TITLE DELETE DELETE DELETE DELETE DELETE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP Lehigh Aches, FL 3397/ DELETE DELETE	its registered
BETT AT LETT ADDRESS AND LETT DELETE	s registered
2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE DELETE 1.1 TITLE DELETE 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP L2 h igh acres, FL 3397/ Changes 1.4 CITY-ST-ZIP L2 h igh acres, FL 3397/ Changes 1.4 CITY-ST-ZIP L2 h igh acres, FL 3397/ Changes 1.4 CITY-ST-ZIP Changes 1.4 CITY	
THE DELETE 1.1 TITLE D AME AME TREET ADDRESS TY-SI-ZIP TREE DELETE 1.1 TITLE D 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP DELETE 2.1 TITLE D 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP TY-SI-ZIP DELETE 1.1 TITLE D Chan Billy Poole 3.3 COUTH Street 2.4 CITY-SI-ZIP TY-SI-ZIP TY-SI-ZIP DELETE 1.1 TITLE D Chan Cha	
ISTREET ADDRESS INCITY-ST-ZIP INCIT	ige Additio
ITLE DELETE 1.4 CITY-ST-ZIP Lehigh AChes, FL 3397/ ITLE DELETE 2.1 TITLE D 22 NAME BITTLE D STREET ADDRESS 32 09 SOuth Street CITY-ST-ZIP Et. Myers, FL 33902	
INTERPORT INTERP	
TAME 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 32 09 SOUth Street 24 CITY-ST-ZIP 31 TITLE DELETE 31 TITLE Char	ige Additi
TITE DELETE 31 TITLE D 2 4 CITY-ST-ZIP Ft.M42FS, FL 33902 Char	
TILE DELETE 31TITLE D	
	nge [/_Additi
AME 32 NAME ROWeana Elize 33 STREET ADDRESS 11 07 2 hd Stragt 1/25 t	
34.CITY-ST-ZIP LEW 190 ACKES FL 33971	
TITLE DELETE 41 TITLE Char	nge Additi
NAME 4.2 NAME 4.3 STREET ADDRESS	
CITY-ST-ZIP 4.4 CITY-ST-ZIP	
	nge Addit
NAME 52 NAME −07/03/3601070048 STREET ADDRESS ***61.25	
54CITY-ST-ZIP 54CITY-ST-ZIP	
TITLE DELETE 6.1 TITLE Cha	
NAME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS	nge Addit
64 CITY - 51 - 7IP	nge Addit
10 A7(3V/A E)oric	79
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florid 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 is 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, Florid and Chapter 619.	la Stitutes. I