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 # 1. Corporation Name

P93000040774 (0)

SUMCARLOS, INC.

FILED Feb 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							Arii Bâlii Alâli	TOUR (DEAR AN)	OLI EIBI IDBI		
14860 SIX MILE CYPRESS PARKWAY 14860 SIX MILE CYPRESS FT MYERS FL 33912 FT MYERS FL 33912				PARKWAY			DO NOT WRIT	E IN THIS :	SPACE		
							3. Date Incorporated or Qualified				
							06/09/1993				
L · L			ing Address			_	4. FEI Number		Ā	pplied For	
21 26							65-0415427		Not Applicable		
Suite, Apt.		27					5. Certificate of Status Desired		•	Additional sequired	
City & State	9	City 8	<u> </u>				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country Zip			Countr	У		8. This corporation owes or has p	aid the cur	rent year In	ntangible	
24	25	29		30			Personal Property Tax due Jun			□ No	
9. Name and Address of Current Registered Agent							10. Name and Address of New R	egistered A	Agent		
NO	LAND, JOHN A			81	l Na	me				1	
1715 MONROE ST FT MYERS FL 33902-0280				82	Stre	eet Addre	et Address (P.O. Box Number is Not Acceptable)				
•	MILNO 1 C 30802-0200			83	3		•				
				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 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.										its registered registered	
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND DIRECTORS				13,		ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12	
TITLE	Ď		DELETE	1.1 TITLE					Change	☐ Addition	
NAME	MCNEW, QUINTON B			1.2 NAME							
STREET ADDRESS				1.3 STREE	1.3 STREET ADDRESS					į.	
CITY-ST-ZIP	FT MYERS FL 33912			1.4 CITY-	ST-7IP						
TITLE	D		DELETE	2.1 TITLE	-			-	Change	Addition	
NAME	HUGHES, ROBERT K JR			2.2 NAME							
STREET ADDRESS	% 14860 SIX MILE CYPRESS PARKWAY			2.3 STREE	2.3 STREET ADDRESS						
CITY-ST-ZIP	FT MYERS FL 33912			2.4 CITY-	ST-ZIP	1					
TITLE	D		DELETE	3.1 TITLE					Change	Addition	
NAME	INGE, RONALD E			3.2 NAME							
STREET ADDRESS	% 14860 SIX MILE CYPRES	S PARKWAY		3.3 STREE	T ADDRE	ss					
CITY-ST-ZIP	FT MYERS FL 33912			3.4. CITY-	ST-ZIP						
TITLE			DELETE	4.1 TITLE					Change	Addition	
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREE	1 ADDRE	ss				i	
CITY-ST-ZIP				4.4 CITY-	ST-ZIP						
TITLE	DELETE		5.1 TITLE					Change	Addition		
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREE	t addre	ss				j	
CITY-ST-ZIP				5.4 CITY-							
TITLE			DELETE	6.1 TITLE		1		-	Change	Addition	
NAME				6.2 NAME							
STREET ADDRESS				63 STREE		ss					
CITY-ST-ZIP				6.4 CITY-							
											

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 poent is fittle 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 trustee empowers 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 attantion with an address.