## 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 # P94000019628 (4)

C NYBERG PERFORMANCE, INC.

**FILED** Apr 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				TII OOIOI (1818 19110 OIIIO (	1001 (001			
2717 N. TAMIAMI TRAIL 2717 N. TAMIAMI TRAIL			:1	COST IN A PER				
NORTH FT. MYERS FL 33909 NORTH FT. MYERS FL 33909			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified	. III THIS STAGE	···
						03/10/1994		
2. Principal Place of Business 2e. Mailing Address		<del></del>	4. FEI Number	1 /	Applied For			
21		26	]			65-0480795	<del></del>	Not Applicable
I Suite, Apt. #, etc. I Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.75	Additional		
27				6. Certificate of Status Desired	Fee F	Required		
City & State City & State					6. Election Campaign Financing		O May Be	
<b>23</b> Zip	Country	28	Zip	Count		Trust Fund Contribution		d to Fees
24	<del></del>	<u> </u>	n '	<del> </del>	У	8. This corporation owes or has pa		ntangible     No
[24]	25   29   30   9. Name and Address of Current Registered Agent				Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent			
NYI	BER, CARL O SR			8	Name	10.		-
2717 N. TAMIAMI TRAIL				82 Street Address (P.O. Box Number is Not Acceptable)				
NORTH FT. MYERS FL 33909			8	Street Addre	ess (P.O. Box Number is Not Acceptat	ole)		
				8:	3			
				8	A City		    7:-	
							FL	o Code
11. Pursuant	to the provisions of Secti	ons 607.0502 and	607.1508, Florida Statu	ites, the abo	ve-named corp	oration submits this statement for the pon's board of directors. I hereby accept	ourpose of changing	its registered
agent. I a	m familiar with, and acco	pt the obligations	of, Section 607.0505, F	lorida Statut	os. Os.	on's board or directors. Thereby accep	or the appointment a	.s registered
SIGNATURE		·						
	Signature, lyped or printed name	ol registered agent and tit FICERS AND DIRE			gent signature require		DATE	
12.	<u>D</u> <u>or</u>	FIGERS AND DIRE	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	
NAME	NYBERG, RUSSELI	S		1.2 NAME			C Change	CJ Addition
STREET ADDRESS	2717 N. TAMIAMI T				T ADDRESS			ŀ
CITY-ST-ZIP	NORTH FT. MYERS			1.4 CITY-				
TITLE	D	· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 TITLE	2"		☐ Change	Addition
NAME	NYBERG, CARL O	SR		2.2 NAME				
STREET ADDRESS	2717 N. TAMIAMI 1			2.3 STREE	T ADDRESS			
CITY-ST-ZIP	NORTH FT. MYERS	FL 33909		2.4 CITY	-ST-ZIP	• .		]
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NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE	T ADDRESS			ļ
CITY-ST-ZIP				3.4. C(TY	ST-ZIP		· · · · · · · · · · · · · · · · · · ·	
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NAME				4. 2 NAM				İ
STREET ADDRESS				4.3 STREE	T ADDRESS			
CITY-ST-ZIP			Delete	4.4 CITY-	ST-ZIP		——————————————————————————————————————	
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NAME				5.2 NAME	i i			
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CITY-ST-ZIP TITLE			DELETE	5.4 CITY- 6.1 TITLE	SI-ZIP		Change	Addition
NAME				6.2 NAME			Gridinge	T 1 Voolgigii
STREET ADORESS					T ADDRESS			
CITY-SI-ZIP				6.4 CITY -				
*****				4.,0,				

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 13 if changed, or on an attachment with an address.