Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90027 045 \*\*\*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 # K37024**

1. Corporation Name

SWISS-FLORIDA PROPERTIES, INC.

0111001	EOINDA THOI EITHEO, INC.							
Principal Place	e of Business	Mailing Address				( 10210111 200 1)111 10011 40110 10110 10110	• • • • • • • • • • • • • • • • • • •	
% JAMIE B. GREUSEL		% JAMIE B. GREUSEŁ						
1104 NORTH C		1104 NORTH COLLIER BLVI MARCO ISLAND FL 34145	).			DO NOT WRITE IN T	HIS SPACE	
MARCO ISLAND FL 34145 US		US				3. Date Incorporated or Qualifed		
00						10/07/1988		
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	A	oplied For
21		26				65-0092229	<del></del>	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional equired
22		27					<del></del>	<del></del>
City & State		City & State				** 6. Election Campaign Financing  Trust Fund Contribution		May Be to Fees
Zip Country		Zip Country				This corporation owes the current year		10 1 003
Zip	25	<u> </u>	30	,,,,		Personal Property Tax.	☐ Yes	D)(\(\dagger)_0
24	9. Name and Address of Current		<u> </u>			10. Name and Address of New Register	ed Agent	/
	-			81 N	ame			
GREUSEL, JAMIE B.				82 S	reet Addre	ss (P.O. Box Number is Not Acceptable)	<del></del>	
% Berry & Greusel				3	ijost Addie			
1104 NORTH COLLIER BLVD.				83			٠	
MAR	ICO ISLAND FL 34145			84 C	ity		. 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida					•		FL   03   2 P	
office or r	egistered agent, or both, in the State or familiar with, and accept the obligation of signature, typed or printed name of registered agent	ons of, Section 607.0505, Flor and title if applicable. (NOTE:	ida Stat	ites.	corporation	when reinstating) DATI	5	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	PD DELETE		1.1 TI				C. Cridingo	
NAME	OEHLER, DR. EDGAR			WIE REET ADD	DECC.			
STREET ADDRESS	1104 N. COLLIER BLVD.		1					
CITY-ST-ZIP TITLE	MARCO ISLAND FL ST DELETE			TY-ST-ZIF TLE			Change	Addition
NAME	OEHLER, MARIANNE	22N						
STREET ADDRESS	AACAN COLLED DIVID			2.3 STREET ADDRESS				
CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	ITY-ST-ZI	1			
TITLE		DELETE - 3.1.T				سراريسي بالأراية البارانية الرجال	Change	Addition
NAME	.*		3.2 NAME					
STREET ADDRESS	TREET ADDRESS		3.3 \$	REET ADD	PRESS			
CITY-ST-ZIP	ļ		3.4. C	ITY-ST-ZI	-			
TITLE		☐ DELETE	4.1 Ti	TLE			Change	☐ Addition
NAME			4. 2 N	AME		•		ļ
STREET ADDRESS			4.3 S	REET ADD	RESS			
CITY-ST-ZIP			4.4 C	TY-ST-ZIF	·   _			
TITLE	<b>_</b>			1				
NAME		☐ DELETE	5.1 T				Change	Addition
		☐ DELETE	5.2 N	AME			Change	Addition
STREET ADDRESS		☐ DELETE	5.2 N 5.3 S	AME IREET ADI			Change	L.) Addition
STREET ADDRESS CITY-ST-ZIP			5.2 N 5.3 S 5.4 C	AME TREET ADI TY-ST-ZIF				
1		☐ DELETE	5.2 N 5.3 S	AME TREET ADI TY-ST-ZIF TLE			Change	

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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

April 10, 99