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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 340393 (8)
1. Corporation Name
GEORGE T. MANN GENERAL CONTRACTOR, INC.



Principal Place of Business Mailing Address
2940 HANSON 2940 HANSON
FT MYERS FL 33916 FT MYERS FL 33916-7508

3. Date Incorporated or Qualified 01/21/1969 3a. Date of Last Report 03/25/1996
4. FEI Number 59-1263142 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
MANN, GEORGE T. J. MANN, George T. Jr.
1453 SANDRA DRIVE
FT. MYERS FL 33901

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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.

SIGNATURE: Signature typed or printed name of registered agent and fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD ☐ DELETE 1.1 TITLE ☐ Change ☒ Addition
NAME MANN, GEORGE T., JR. 1.2 NAME
STREET ADDRESS 1453 SANDRA DR. 1.3 STREET ADDRESS
CITY-ST-ZIP FT. MYERS FL 33901
TITLE VD ☒ DELETE 2.1 TITLE ☐ Change ☒ Addition
NAME MANN, GEORGE T. 2.2 NAME
STREET ADDRESS 3934 W. RIVERSIDE DR. 2.3 STREET ADDRESS
CITY-ST-ZIP FT. MYERS FL 33901
TITLE STD ☐ DELETE 3.1 TITLE ☐ Change ☒ Addition
NAME MANN, BARBARA B 3.2 NAME
STREET ADDRESS 3934 W. RIVERSIDE DR. 3.3 STREET ADDRESS
CITY-ST-ZIP FT. MYERS FL 33901
TITLE VD ☐ DELETE 4.1 TITLE ☐ Change ☒ Addition
NAME MANN, JENA L 4.2 NAME
STREET ADDRESS 1453 SANDRA DR. 4.3 STREET ADDRESS
CITY-ST-ZIP FT. MYERS FL 33901
TITLE V ☐ DELETE 5.1 TITLE ☒ Change ☐ Addition
NAME GEORGE T MANN III 5.2 NAME
STREET ADDRESS 1453 SANDRA DR. 5.3 STREET ADDRESS 1316 BARTWOOD
CITY-ST-ZIP FT. MYERS FL 33901
TITLE ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition
NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS
CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Jena L Mann 1-14-97 94/3343742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)