

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 433785 (3)
1. Corporation Name
SEWER VIEWER, INC.

Principal Place of Business 16880 GATOR ROAD SUITE 105 FT MYERS FL 33912 US	Mailing Address 16880 GATOR ROAD SUITE 105 FT MYERS FL 33912 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8105 Mainline Parkway Suite, Apt. #, etc. 22 City & State 23 Ft Myers, FL 24 33912 25 USA		2a. Mailing Address 26 16880 Gator Road Suite, Apt. #, etc. 27 City & State 28 Ft Myers, FL 29 33912 30 USA		3. Date Incorporated or Qualified 08/28/1973	4. FEI Number 59-1480787 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 owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent BROWN, DONNA 16880 GATOR ROAD SUITE 105 FT MYERS FL 33912				10. Name and Address of New Registered Agent 81 Name Brown, Donna 82 Street Address (P.O. Box Number is Not Acceptable) 16880 Gator Rd 83 84 City Ft Myers FL 85 Zip Code 33912	
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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 Donna Brown DATE 4/29/98
Signature, typed or printed name of registered agent and state if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME BROWN, LEIGHTON STREET ADDRESS 16880 GATOR ROAD CITY-ST-ZIP FT MYERS FL 33912	☒ DELETE	1.1 TITLE PD 1.2 NAME Brown, Morgan 1.3 STREET ADDRESS 16880 Gator Road 1.4 CITY-ST-ZIP Ft Myers FL 33912	☒ Change ☐ Addition
TITLE VD NAME DONALSON, BRANT STREET ADDRESS 16880 GATOR ROAD CITY-ST-ZIP FT MYERS FL 33912	☒ DELETE	2.1 TITLE TSD 2.2 NAME Brown, Donna 2.3 STREET ADDRESS 16880 Gator Road 2.4 CITY-ST-ZIP Ft Myers FL 33912	☒ Change ☐ Addition
TITLE DT NAME DORAGH, ROBERT STREET ADDRESS 16880 GATOR ROAD CITY-ST-ZIP FT MYERS FL 33912	☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE DP NAME BROWN, MORGAN STREET ADDRESS 16880 GATOR ROAD, SUITE 105 CITY-ST-ZIP FORT MYERS FL 33912	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE S NAME BROWN, DONNA STREET ADDRESS 16880 GATOR ROAD, SUITE 105 CITY-ST-ZIP FT MYERS FL 33912	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE Donna Brown DATE 4/29/98 941-267-3344

CR2E034 (10/97)