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Jan 17 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 # 503390

(7)

1. Corporation Name:
VIROGROUP, INC.



Principal Place of Business
428 PINE ISLAND RD., S.W.
CAPE CORAL FL 33991

Mailing Address
428 PINE ISLAND RD., S.W.
CAPE CORAL FL 33991-1945

3. Date incorporated or Qualified
05/18/1976

3a. Date of Last Report
02/05/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1671036

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLLAND, LARRY K
17080 HARBOUR PT DR
FT MYERS FL 33908

81 Name ACKERLY, LARRY D.
82 Street Address (P.O. Box Number is Not Acceptable)
428 PINE ISLAND RD SW

84 City CAPE CORAL

FL 85 Zip Code 33991

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: *Larry Ackery* LARRY D ACKERLY VP/CFO

1/9/97

Signature of person filing or registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ST
NAME ACKERLY, LARRY
STREET ADDRESS 428 PINE ISLAND ROAD SW
CITY- ST- ZIP CAPE CORAL FL ☐ DELETE

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

TITLE V
NAME O'CONNEL, THOMAS H
STREET ADDRESS 428 PINE ISLAND ROAD SW
CITY- ST- ZIP CAPE CORAL FL ☐ DELETE

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

TITLE CPD
NAME OGDEN, SYLVESTER
STREET ADDRESS 428 PINE ISLAND ROAD SW
CITY- ST- ZIP CAPE CORAL FL ☐ DELETE

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

TITLE V
NAME HORVATH, LLOYD E
STREET ADDRESS 428 PINE ISLAND ROAD, SW
CITY- ST- ZIP CAPE CORAL FL ☐ DELETE

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE V
NAME HOLLAND, LARRY K
STREET ADDRESS 428 PINE ISLAND ROAD SW
CITY- ST- ZIP CAPE CORAL FL ☐ DELETE

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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: *Larry Ackery* LARRY ACKERLY CFO/VP

1/9/97 941-574-1919

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)