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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 536163

(9)

FRED W. AHLEMEIER, CO. OF FLORIDA

FILED Feb 24 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | { | HA BABAR BABAR | ALAIF BIŞKI BIŞI | |
|--------------------------------------------------------------------------------------|-----------------------------------------|-------------------------|-------------|-------------------------------------------------------------------------|-------------------------|------------------------------|----------------------------------------------|--------------------------------------------------------------------------------|---------------------------|-----------------------------|----------------------------|
| 934 SAN CARLOS DR FT MYERS BCH FL 33931-2226 | | | | 934 SAN CARLOS DR FT MYERS BCH FL 33931-2226 | | | | DO NOT WRITE | E IN THIS S | SPACE | |
| | | | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | | | 06/01/1977 | | | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | 4. FEI Number | | | oplied For |
| Suite, Apt. #, etc | | | | Suite, Apt. #, etc. | | | | 43-1146040 | | | ot Applicable |
| 22 | | | | 27 | | | | 5. Certificate of Status Desired | | \$8.75 / Fee Re | Additional |
| City & State | | | | City & State | | | A Floring Council of the | | | • | |
| 23 | | | | 28 | | | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 Added 1 | |
| Zip | | Country | 1=01 | Zip Country | | | , | 8. This corporation owes or has pa | | | |
| 24 | 25 | | 29 | | 30 | • | | Personal Property Tax due June | | |] No |
| 9. Name and Address of Current Registered Agent | | | | | | | 10. Name and Address of New Registered Agent | | | | |
| AHLEMEIER, FRED W., JR. | | | | | | | Name | | | | |
| 934 SAN CARLOS DR | | | | | | | Street Addr | dress (P.O. Box Number is Not Acceptable) | | | |
| FT MYERS BCH, FL | | | | | | | | | | | |
| FT MYERS BEACH FL 33931 | | | | | | 83 | | | | | |
| | | | | | | 84 | City | | | 85 Zip (| Code |
| | | | | | | | | | <u>FL</u> | 11 1 | |
| office or r | 'ogistored agent. | , or both, in the State | e of Florid | 07.1508, Florida Statu da. Such change was f, Section 607.0505, F | : authoriz e | d by | the corporati | oration submits this statement for the lon's board of directors. I hereby acce | purpose of pt the appo | changing its pintment as | s registered registered |
| SIGNATURE | | | | | | | | | | | |
| Signature, typed or pointed name of registered agent and title if applicable (NOTE R | | | | | | | ni signature require | ed when reinstating) | DATE | | |
| 12. | ST | OFFICERS AN | ALS ESHAE C | DELETE | 13. | 7. 5 | | ADDITIONS/CHANGES TO OFFICE | CERS AND | | |
| NAME | | DADDV W | | □ betet | 1.1 Tr | | | | | Change | Addition |
| STREET ADORESS | AHLEMEIER, BARRY W. 934 SAN CARLOS DR. | | | | | 1.2 NAME | | | | | |
| 1 | FT 10/FD0 B0(1 C) | | | | | 1.3 STREET ADDRESS | | | | | 1 |
| CITY-ST-ZIP TITLE | PD | | | | | 1.4 CITY-ST-ZIP 2.1 TITLE | | | | Change | ☐ Addition |
| NAME | | , FRED W. JR. | | | . It | 22 NAME | | | | Ondingo | |
| STREET ADDRESS | | ELMAR BLVD. | | | | 2.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | ST. LOUIS I | | | | | | ADDINESS ST-ZIP | | | | 1 |
| TITLE | V V | | DELETE 31T | | | | ., ., | | | Change | Addition |
| NAME | AHLEMEIER, FRED W, III | | | | | 3 2 NAME | | | | | |
| STREET ADDRESS | | | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | FT MYERS BCH, FL 00000 | | | 3.4. C | | | ST-ZIP | | | | . [|
| TITLE | V | | | DELETE | 4.1 Ti | | | | | Change | ☐ Addition |
| NAME | NORTON, J | OHN | | | 4.2 N | AME | Ì | | | | |
| STREET ADDRESS | 1000 011 011101101 | | | 4.3 S | | | ADDRESS | | | | |
| CITY-ST-ZIP | CAPE CORAL FL 33914 | | | | | | T-ZIP | | | | |
| TITLE | | | | DELETE | 5.1 Ti | FLE | | | | ☐ Change | Addition |
| NAME | | | | | 5.2 N/ | ME | | | | | |
| STREET ADDRESS | | | | | 5381 | REET | address | | | | |
| CITY+ST-ZIP | | | | | 5.4 CI | TY - S1 | T - ZłP | | | | |
| TITLE | | | | ☐ DELETE | 6.1 TO | ΙLΕ | f | | | Change | Addition |
| NAME | | | | | 6.2 NA | | | | | | |
| STREET ADDRESS | | | | | 6.3 ST | REET. | ADDRESS | | | | |
| CITY-ST-ZIP | matal short the '- 4 | | 31.20 | | 6.4 CI | TY-S1 | T- ZIP | 2 - 4 - 4 - 6 - 7 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 | | | |

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in