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

**PROFIT CORPORATION** ANNUAL REPORT

1997

IAN & COMPANY, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 558622

(7)

## **FILED** May 12 1997 8:00am Secretary of State



Principal Place of Business		Mailing A	Mailing Address				ı indələr direci darka delire kirin ekril dibik dibik dibik dibik dibik dibik dibik					
2022 NW 43RD ST Suite A-1 Gainesville Fl 32006		SUITE A-	2622 NW 43RD ST Suite A-1 Gainesville Fl 32606-6678									
U\$		U\$					3. Date Incorporated or Qualified					
2. Principal P	lace of Business	2a. Mailin	2a. Mailing Address				4. FEI Number			Applied For		
21		26					59-2186573			Not Applicabl	e	
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State	9	City &	City & State				6. Election Campaign Financing \$5.00 May Be					
23		28	28				Trust Fund Contribution	Added to Fees				
Zip	Country	PD Country				8. This corporation has liability for intangible tax under s. 199.032,				7		
24	25	29	30				Florida Statutes XYes No					
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
SEITMAN, IAN					81	Name						
	5 NEWBERRY ROAD					Stront Addross (P.O. Boy Number is Not Associable)					-	
	NESVILLE FL 32606				82 Street Add 2623		dress (P.O. Box Number is Not Acceptable) 2			-/		
					83			7 - 7 - 7	k		7	
							· · · · · · · · · · · · · · · · · · ·					
					84	City /	WES VICE {	FL		ip Code		
11. Pursuant office or r	to the provisions of Soctions 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508 te of Florida, Suc	3, Florida Statut h change was	tes, the al	IL bove∹ ed by t	named corpo he corporation	oration submits this statement for the on's board of directors. I hereby ac		changing ointment	32606 g its registored as registered	3	
SIGNATURE	Signature, typed or printed name of registered a					edual in roadio	d where reinstating)	DATE		** ******** *		
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO O		DIRECT	ORS IN 12	6	
TITLE	POST		DELETE	1.1.11	ITI E		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11101101111	Chang		Ş	
NAME	SEITMAN, IAN			1.2 N							·   \	
STREET ADORESS	2822 NW 43RD ST SUITE A	.1			TREET AL	nnecee					8	
CITY-ST-ZIP	GAINESVILLE FL	•			11Y-\$1-						Ü	
TITLE	- Contraction of the Contraction		Decene	217		/Ir			Chang	e 🔲 Additro	<u></u>  6	
NAME				2.2 N/				•.	L) Onting	le [1] Vanitio	"   ~	
STREET ADDRESS				1		DDDCCC		74				
					TREET AL							
CITY-ST-ZIP TITLE			DELFTE	3.1 11	31Y-S1	· ZIP			Chang	A Addition		
NAME			E DULITE	1					L Chang	e L. Additio	"	
				3.2 N/		Donico						
STREET ADDRESS					TREET AL							
CITY-ST-ZIP TITLE			DELETE		11Y-S1-	-ZIP			Char	n Alaber-		
NAME			C) buttle	4.1 1					Chang	ie 🔲 Addilio	"	
				4. 2 N								
STREET ADDRESS					TREET AL							
CITY-ST-ZIP			Delicac		IIY · \$1-	ZIP			<del></del>		_	
TITLE			☐ DELE1E	5.1 1					Chang	e L. Addilio	n	
NAME				5.2 N								
STREET ADDRESS				5.3 \$1	TREET AL	DURESS						
CITY-ST-ZIP			7-2		114-81-	ZIP					$\Box$	
TITLE	\$		DELETE	6.110	ΠLE				☐ Chang	e [] Addilio	n	
NAME	· ::			6.2 N	AME							
STREET ADDRESS				6.3 \$1	IREET AL	DDRESS						
CITY-ST-ZIP				6.4 CI	IIY-S1-	ZIP						

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 Statutos. 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 logal 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.