

559104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

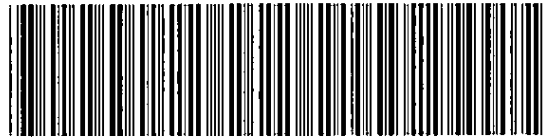
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400403003094

CORPORATION FOR PROFIT

Word Processing: February 9, 1978 By: sl

Updating: 2-22-78 By: ABW

A notification letter was mailed to:
William N. Horowitz, Esq.
Post Office Box 280
Fort Myers, Florida 33902 Addressed to: Mr. Horowitz

Corporation Name: GATELEY DANIEL CORPORATION

Filing Date: February 7, 1978,

Charter Number: 559104

Capital Stock: 7,500 shares @ \$1.00

Money acknowledged on letter: \$63.00

559104

LAW OFFICES

HENDERSON, FRANKLIN, STARNES & HOLT

PROFESSIONAL ASSOCIATION

2100 SECOND STREET

POST OFFICE BOX 280

FORT MYERS, FLORIDA 33902

AREA CODE 813
334-4121

PARKER HOLT
LLOYD G. HENDRY
JAMES A. FRANKLIN, JR.
WILLIAM L. GRADY
ALBERT M. FRIERSON
HUGH E. STARNES
ERNEST M. HATCH, JR.
STEPHEN L. HELGEMO
RONALD W. SHALLEY
PATRICK E. GERAAGHTY
JOHN G. HOLST, JR.
JOHN A. NOLAND
KEMPTON R. LOGAN
RIM R. HART
WILLIAM N. HOROWITZ
GERALD W. PIERCE
JAMES G. DECKER
HARRY O. HENDRY
J. TERRENCE PORTER

FILED
FEB 7 11 45 AM '78
ROBERT A. HENDRY, JR. 1922-1954
JAMES A. FRANKLIN 1905-1960
TALLAHASSEE, FLORIDA
HENDERSON, FRANKLIN, STARNES & HOLT

January 27th, 1978

59878

The Honorable Bruce A. Smathers
Secretary of State
Department of State
State of Florida
Tallahassee, Florida 32304

Amc

7312 8 - 707 ***
7312 7 - 706 ***
7312 6 - 705 ***
7312 5 - 704 ***

Re: Corporate Division (filing of Articles of
Incorporation)

Dear Sir:

Enclosed herewith please find the original and one copy of the
Articles of Incorporation of Gateley Daniel Corporation together
with our check made payable to your order in the amount of \$63.00
to cover the following costs:

ITEM	AMOUNT
Charter Tax	\$30.00
Filing Fee	15.00
Certificate of Resident Agent	3.00
Certified Copy of Charter	15.00
Total	\$63.00

Upon acceptance of the charter and the filing thereof by your
office, please provide our office with a certified copy of the
corporate charter.

Your cooperation in this regard is greatly appreciated. Thank
you.

Sincerely yours,

John A. Noland

William N. Horowitz

for

WNH/kb
Enclosures

PAYEE'S TAX	
C. TAX	30
FILING	15
C. COPY	3
R. A. FEE	3
P. COPY	
TOTAL	63
BALANCE DUE	

FILED

FEB 7 11 45 AM '76

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

559104

ARTICLES OF INCORPORATION

OF

GATELEY DANIEL CORPORATION

These Articles of Incorporation are executed by the undersigned for the purpose of forming a corporation pursuant to the Florida General Corporation Act, as particularly set forth in Chapter 607 of the Florida Statutes.

ARTICLE I. NAME.

The name of this corporation shall be GATELEY DANIEL CORPORATION.

ARTICLE II. DURATION.

The corporation shall commence upon the filing of these Articles and shall have perpetual existence thereafter.

ARTICLE III. PURPOSE.

The purpose for which the corporation is organized is the transaction of any and all lawful business for which a corporation may be incorporated under the Florida General Corporation Act, as the same may from time to time be amended.

ARTICLE IV. CAPITAL STRUCTURE.

The aggregate number of shares of capital stock which this corporation shall have authority to issue shall be 7,500 shares of common stock, all of the same class and each having a par value of one (\$1.00) dollar.

ARTICLE V. INITIAL REGISTERED AGENT & OFFICE.

The name of the initial registered agent of the corporation at its initial registered office, and the street address of its initial registered office, is as follows:

Gateley N. Daniel
2938 Cleveland Avenue
Fort Myers, Florida 33901

ARTICLE VI. DIRECTORS.

The business and the affairs of this corporation shall be managed by a Board of Directors, which shall be elected by the shareholders and serve as provided in the by-laws. The number of the members of the Board of Directors may either be increased or decreased from time to time by the by-laws, but shall never be less than one (1). The corporation shall have two directors initially, and the name and address of each initial director is as follows:

<u>NAME</u>	<u>ADDRESS</u>
Gateley N. Daniel	2938 Cleveland Avenue Fort Myers, Florida 33901
June F. Daniel	2938 Cleveland Avenue Fort Myers, Florida 33901

ARTICLE VII. PREEMPTIVE RIGHTS.

Every shareholder, upon the issuance by the corporation of authorized but unissued shares of stock of the corporation (other than the original issue of shares of stock to subscribers)

or upon the issuance by the corporation of treasury stock, shall have the right to purchase a pro-rata share thereof, as nearly as may be done without issuance of fractional shares, at the price at which it is issued to others.

ARTICLE VIII. BY-LAWS.

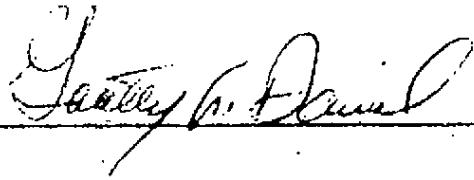
The power to adopt, alter, amend or repeal by-laws shall be vested in both the Board of Directors and the shareholders. By-laws adopted, altered, amended or repealed by the shareholders of the corporation may not be repealed, altered, amended or re-adopted by the Board of Directors if the shareholders so provide.

ARTICLE IX. INCORPORATORS.

The name and the address of each person signing these Articles of Incorporation are as follows:

<u>NAME</u>	<u>ADDRESS</u>
Gateley N. Daniel	2938 Cleveland Avenue Fort Myers, Florida 33901

IN WITNESS WHEREOF, each person executing these Articles of Incorporation has caused his hand and seal to be set this 27 day of January, 1978.



ACCEPTANCE OF DESIGNATION AS RESIDENT AGENT

Having been named to accept service of process for this corporation, at the place designated in this certificate, I hereby accept the appointment and agree to act in this capacity and to comply with the provisions of Chapter 48.091, Florida Statutes, relative to keeping open said office.

Gateley N. Daniel
Gateley N. Daniel, Resident Agent

STATE OF FLORIDA)
COUNTY OF LEE)

Before me personally appeared Gateley N. Daniel known to me to be the individual described in and who executed the foregoing, and acknowledged before me that he executed the same for the purposes therein expressed.

Witness my hand and official seal in the County and State named above this 27th day of January, 1978.

My Commission Expires:

Agatha Ann Dargatzis
Notary Public

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES DEC. 3 1981
BONDED THRU GENERAL INS. UNDERWRITERS

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.00

CORPORATION
ANNUAL REPORT



STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE

FILED
MAY 11 1 12 AM 1979
FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

559104
2938 CLEVELAND AVE
FT. MYERS, FLORIDA 33901

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

2/07/1978

4. Federal Employer Identification Number (FEIN)

59-1796-864

5. Date of Last Report

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DANIEL, GATELEY N	PO	2938 CLEVELAND AVE	FT MYERS, FL
DANIEL, JUNE F.	O	2938 CLEVELAND AVE	FT MYERS, FL

Registered Agent Information

Name

DANIEL, GATELEY N

Street Address (Do NOT Use P.O. Box Number)

2938 CLEVELAND AVE

City, State and Zip Code

FT MYERS, FLORIDA

33901

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

7. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.

Typed Name of Signing Officer

Gateley N. Daniel

Title

President

Telephone Number

813-334-2105

Date

1/18/79

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

03-30-79 2 5 529 10.00

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

DO NOT WRITE IN THIS SPACE

FILED

APR 25 8 07 AM '80

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT**

1. Name and Address of Corporation Principal Office:

559104
DANIEL (GATELEY) CORPORATION
~~2930 CLEVELAND AVE~~
FT MYERS, FLORIDA ~~33901~~

If above address is incorrect in any way, enter the correct address,
in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address
1700 Medical Lane

P.O. Box No.

City
Fort Myers

State
Florida

Zip Code
33907

3. Date Incorporated or Qualified To Do Business in Florida

2/07/1976

4. Federal Employer Identification Number (FEIN)

59-1796864

5. Date of Last Report

1979

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DANIEL, GATELEY N	P/D	1137 N. Town & River Drive 2930 CLEVELAND AVE	Fort Myers, Florida FT MYERS, FL
DANIEL, JUNE F.	D	1137 N. Town & River Drive 2930 CLEVELAND AVE	Fort Myers, Florida FT MYERS, FL
Sherry A. Miller	VP	6611 Cypress Lake Drive	Fort Myers, Florida
John C. Davidson	VP	2950 Mo Gregor Boulevard	Fort Myers, Florida

7. Registered Agent Information

Name
DANIEL, GATELEY N
Street Address (Do NOT Use P.O. Box Number)
~~2930 CLEVELAND AVE~~ 1700 Medical Lane
City, State and Zip Code
FT MYERS, FLORIDA ~~33901~~ 33907

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer
Gateley N. Daniel

Title
President

Telephone Number
813/939-5511

Signature

Date
March 26, 1980

DO NOT WRITE IN THIS SPACE

GH 4 25 80

559104 24-15-80 2 A 1195 10.00

FILE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

**CORPORATION
ANNUAL REPORT**

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

MAY 7 9 47 AM '81

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office		2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient	
559104 DANIEL (GATELEY) CORPORATION 1700 MEDICAL LANE FT. MYERS, FLORIDA 33907		Street Address P.O. Box No. City State (Zip Code)	
If above address is the same in any way, enter the correct address. Do not use separate Zip Codes.			

3. Date of Corporation Established To Do Business in Florida	4. Federal Employer Identification Number (EIN)	5. Date of Last Report
2/07/1978	59-1796864	1980

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DANIEL, GATELEY, N.	P/D	1137 N. TOWN & RIVER DR	FT MYERS, FL
DANIEL, JUNE F.	D	1137 N. TOWN & RIVER DR	FT MYERS, FL
WILLER, SHERRY A.	V	6611 CYPRESS LAKE DR	FT MYERS, FL
GAYLSON, JOHN C.	V	2950 MC BRIGGS BLVD	FT MYERS, FL
English, James D., Jr.	V	Rt. 2, Box 36	Alva, FL

Registered Agent Information		To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3.
Name DANIEL, GATELEY, N.		
Street Address (Do NOT Use P.O. Box Number) 1700 MEDICAL LANE		
City, State and Zip Code FT MYERS, FLORIDA 33907		

Signature and Title of Officer or Director (Signature must be under instructions on reverse side of this form)		Filing Number
I, <u>James D. English, Jr.</u> , President, do hereby certify that the information furnished in this report is true and correct to the best of my knowledge and belief.		
Date of Filing (Month and Year)		Date

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT
1982



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

George F. Sullivan
Secretary of State

FILED
FEB 1 5 42 PM '82
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries.
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

2. Exact Change of Address of Corporation Principal Office, P.O. Box Number, Address is not different

Street Address

P.O. Box No.

City

State

Zip Code

3. Date Incorporated or Qualified
in the Jurisdiction of Florida

02/07/1978

4. Federal Employer's
Identification Number (FEIN)

59-1796864

5. Date of
Last Report

05/07/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address in Exact English and Spanish (Do not use P.O. Box Number)	City and State
DANIEL, GATELEY N.	P/D	1137 N TOWN & RIVER DR	FT MYERS, FL
DANIEL, JUNE F.	D	1137 N TOWN & RIVER DR	FT MYERS, FL
MILLER, SHERRY A.	V	6611 CYPRESS LAKE DR	FT MYERS, FL
DAVIDSON, JOHN C.	V	2950 MC GREGOR BLVD	FT MYERS, FL
ENGLISH, JAMES D., JR.	V	RT. 2, BOX 66	ALVA, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

8. Name and Address of New Registered Agent

City

Street Address (Do not use P.O. Box Number)

City, State and Zip Code

A. I, President of the Corporation, do hereby certify that the above is a true and correct statement of the names and addresses of the officers and directors of the Corporation, and that the same are qualified to hold office in the State of Florida.

B. Such change was authorized by the Board of Directors of the Corporation on the _____ day of _____, 1982.

SIGNATURE

(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

See instructions to registered agent on the reverse side of this form.

I, _____, President of the Corporation, do hereby certify that the above is a true and correct statement of the names and addresses of the officers and directors of the Corporation, and that the same are qualified to hold office in the State of Florida.

Signature *Daniel N. Daniel*
Daniel N. Daniel
President

Date *January 11, 1982*
Secretary of State
(813) 989-5811

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1983



George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
FILED

APR 27 10 45 AM 1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

Name and Address of Corporation in Principal Office

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State

Zip Code

Expiring or Expiration
Date in Florida

02/07/1978

1. Federal Employer
Identification Number (EIN)

53-1796864

2. Date of
Last Report

02/01/1982

Name and Address of Each Officer and Director

Name of Officers
and Directors

Title

Home Address of Each
Officer and Director
(Do NOT use P.O. Box Number)

City and State

DANIEL, GATELEY N	P/D	1137 N TOWN & RIVER DR	FT MYERS, FL
DANIEL, JUNE F.	O	1137 N TOWN & RIVER DR	FT MYERS, FL
MILLER, SHERRY A.	V	6611 CYPRESS LAKE DR	FT MYERS, FL
DAVIDSON, JOHN C.	V	2750 MC GREGOR BLVD	FT MYERS, FL
ENGLISH, JAMES D., JR.	V	RT. 2, BOX 86	ALVA, FL

Registered Agent Information

Name and Address of Current Registered Agent

Name and Address of New Registered Agent

DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

For the purpose of changing the registered office, the undersigned corporation, organized under the laws of the State of Florida, hereby certifies that the foregoing information is true and correct and that the undersigned is duly authorized to execute this statement for the purpose of changing the registered office of the corporation in the state of Florida.

This was duly and lawfully executed and adopted by the said corporation on the date hereinafter set forth.

Date

Date

Signature of Agent Accepting Appointment

\$3.00 additional fee required for Registered Agent changes.

See separate instructions under "Filing Instructions" on reverse side of this form.

I, the undersigned, do hereby certify that the foregoing information is true and correct and that the undersigned is duly authorized to execute this statement for the purpose of changing the registered office of the corporation in the state of Florida.

George Firestone
DANIEL, GATELEY N

President

March 14, 1983

313-939-5511

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION
ANNUAL REPORT

1984



FLORIDA DEPARTMENT OF STATE
George F. J. ...
Secretary of State
DIVISION OF CORPORATIONS

July 27 1984

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office		2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.	
559104 DANIEL (GATELEY) CORPORATION 1700 MEDICAL LANE FT MYERS, FLORIDA 33907		Street Address	
		P.O. Box No.	
		City	
		State Zip Code	

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida	02/07/1976	4. Federal Employer Identification Number (FEIN)	59-1796864	5. Date of Last Report	04/27/1983
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6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983					
Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	Zip Code	
1. DANIEL, GATELEY N	P/D	1137 N TOWN & RIVER DR	FT MYERS, FL	0000	
2. DANIEL, JUNE F	D	1137 N TOWN & RIVER DR	FT MYERS, FL	0000	

Registered Agent Information	
7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
DANIEL, GATELEY N 1700 MEDICAL LANE FT MYERS, FLORIDA 33907	Name Street Address (Do NOT Use P.O. Box Number) City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered officer or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

\$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That: I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature	Date
<i>Gateley N. Daniel</i>	June 15, 1984
Typed Name of Signing Officer	Telephone Number
Gateley N. Daniel	813-939-5511
Title	
President	

11. Should you desire a certificate of status check the box below and include an additional \$5.00 with your payment.

CERTIFICATE OF STATUS DESIRED
\$5 Additional fee required for certificates

CORP-2011-24

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT
1985FLORIDA DEPARTMENT OF STATE
George F. Malone
Secretary of State
DIVISION OF CORPORATIONSAPPROVED
AND
FILED

Read Notice and Instructions on Other Side Before Making Entries

AUG - 7 PM 12 45

Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Address is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified To Do Business in Florida

02/07/1978

4. Federal Employer Identification Number (FEIN)

59-1796864

5. Date of Last Report

06/26/1984

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City, State and Zip Code
DANIEL, GATELEY N	P/D	1137 N TOWN & RIVER DR	FT MYERS, FL 0000
DANIEL, JUNE F	D	1137 N TOWN & RIVER DR	FT MYERS, FL 0000
HAMM, ENE	V	136 Anchorage Street	FT. Myers Beach, FL 33931

Registered Agent Information

7. Name and Address of Current Registered Agent

DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA

33907

8. Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83

Zip Code 84

I, Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, Its Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath. (Officer's signature must be listed in Block 6)

Signature

Ene Hamm

Date

August 1, 1985

Typed Name of Signing Officer

ENE HAMM

Title

Vice President

Telephone Number

813-939-5511

\$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT
1986



FLORIDA DEPARTMENT OF STATE
George F. Jumper
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation or Proprietor (207a)

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

5

2. Enter Change of Address of Corporation or Proprietor (207b)
Office: P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code.

3. Is Corporation or Qualified
Individual in Florida

02/07/1978

4. Federal Employer
Identification Number (FEIN)

59-1796864

5. Date of
Last Report

08/07/1985

6. List and Give Address of Each Officer and Director as of December 31, 1985

7. Names of Officers
and Directors

8. Title

9. Street Address of Each
Officer and Director
(Do NOT Use Post Office Box Numbers)

10. City and State

DANIEL, GATELEY N

P/D

1137 N TOWN & RIVER DR

FT MYERS, FL

00000

DANIEL, JUNE F

D

1137 N TOWN & RIVER DR

FT MYERS, FL

00000

HAMM, ENE

V

135 ANCHORAGE STREET

FT MYERS BEACH, FL

REGISTERED AGENT INFORMATION

1. Name and Address of Current Registered Agent

DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

2. Name and Address of New Registered Agent

Name 31

Street Address (Do NOT Use P.O. Box Number) 32

City and State 33

FL

Zip Code 34

I, the undersigned, in compliance of Sections 607.014 and 607.017, Florida Statutes, hereby certify that the above named corporation, incorporated within the laws of the State of Florida, when authorized for the purpose of changing its registered office, or registered agent, or both, in the State of Florida,

such change was authorized by resolution duly adopted by its board of directors on _____

and hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.017, F.S.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

See signature test of box under instruction 2 on reverse side of this form.

I, the undersigned, being an Officer of the Corporation, the Receiver or Trustee, Employee or Executive, This Report as Required by Chapter 607 F.S.,
do hereby certify that I understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.
(Officer's name must be listed in Block 6.)

Ene Hamm

(Signature of Officer)

Ene Hamm

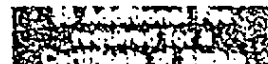
Title

Vice President

June 11, 1986

Telephone Number

813-939-5511



FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987



FLORIDA DEPARTMENT OF STATE
George Friesstone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office:

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

5

2 Enter Change of Address of Corporation Principal Office, P.O. Box Number, Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

Date Incorporated or Qualified To Do Business in Florida

02/07/1978

4. Federal Employer Identification Number (FEIN)

59-1798864

5. Date of Last Report

06/17/1986

Name and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DANIEL, GATELEY N	P/O	1137 N TOWN & RIVER DR	FT MYERS, FL 00000
DANIEL, JUNE F	D	1137 N TOWN & RIVER DR	FT MYERS, FL 00000
HAYN, ENE	V	136 ANCHORAGE STREET	FT MYERS BEACH, FL

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

6. Name and Address of New Registered Agent

Name 61

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

Zip Code 85

FL

I, the undersigned, in compliance of Sections 607.014 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this document for the purpose of changing its registered office, or registered agent, or both, in the State of Florida.

I am changeable authorized by resolution duly adopted by its board of directors on _____

Signature of

(Registered Agent Accepting Appointment)

DATE

\$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

I, the undersigned, being an Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 P.S., hereby certify that I understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

(The undersigned must be listed in Item 4.)

Signature of Gateley N. Daniel

President

Date

June 24, 1987

Telephone Number

813-939-5511

\$5 Additional Fee required for a Certificate of Status

FILE STATUS OF STATUS REQUIRED

0426034 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

**ANNUAL REPORT
1988**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

559104
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code

Date Incorporated or Qualified to Do Business in Florida

02/07/1978

4. Federal Employer Identification Number (EIN)

59-1796954

5. Date of Last Report

07/06/1987

6. Name and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors

2

Title

3

Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)

4

City and State

DANIEL, GATELEY N

P/D

1137 N TOWN & RIVER DR

FT MYERS, FL

00000

DANIEL, JUNE P

D

1137 N TOWN & RIVER DR

FT MYERS, FL

00000

HAYS, ENE

V

136 ANCHORAGE STREET

FT MYERS BEACH, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

DANIEL, GATELEY N

1700 MEDICAL LANE

FT MYERS, FLORIDA 33907

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Numbers) 82

Street Address 2 (Do NOT Use P.O. Box Numbers) 83

City and State 84

FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.035, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, hereby certifies that the purpose of changing its registered office or registered agent, or both, in the State of Florida, such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent, I am familiar with and accept the obligations of Section 607.035 F.S.

Signature 86

(Registered Agent Accepting Appointment)

DATE

10. If a foreign corporation, file and published business in Florida

See signature instructions under instructions on reverse side of this form

I Certify That: I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.

I have Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath

(Officer or Director signing must be listed in Block 6)

Daniel N. Daniel

Date

5/24/89

Name of Officer or Director

GATELEY N. DANIEL

PRESIDENT

813-939-5511

11. Date of filing, please attach a copy of this report to the filing

12. If a foreign corporation, file and published business in Florida

13. If a foreign corporation, file and published business in Florida

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

**ANNUAL REPORT
1989**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

**APPROVED
AND
FILED**

1989 JUN 29 AM 9:28

Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

Name and Address of Corporation Principal Office

ZIP + 4

559104 5
DANIEL (GATELEY) CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907-1151

If above address is incorrect in any way, enter the correct address
in item 2, include Zip Code

2. Enter Change of Address in Corporation Principal
Office, P.O. Box Number, City, State, Zip Code

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date of Report
to be filed in Florida

02/07/1978

4. Federal Employer
Identification Number (FEIN)

59-1796864

5. Date of
Last Report

06/15/1988

6. Name and Street Address of Each Officer and Director, as of December 31, 1988

7. Title	8. Name of Officers and Directors	9. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	10. City and State	11. Zip Code
P/D	DANIEL, GATELEY M	1137 N TOWN & RIVER DR	PT MYERS, FL	00000
D	DANIEL, JUNE F	1137 N TOWN & RIVER DR	PT MYERS, FL	00000
V	HARRIS, BOB	136 ANCHORAGE STREET	PT MYERS BEACH, FL	

REGISTERED AGENT INFORMATION

12. Name and Address of New Registered Agent

Name B1

Street Address 1 (Do NOT Use P.O. Box Number) B2

Street Address 2 (Do NOT Use P.O. Box Number) B3

City and State B4

FL.

Zip Code B5

DANIEL, GATELEY M
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907

I, the undersigned, as of Section 807.02(4) and 807.02(5), Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this report and the information contained herein as required by law and is authorized by the board of directors of the corporation.

I am a resident of the State of Florida and am familiar with, and accept the obligations of, Section 807.02(5) F.S.

Signature of Registered Agent

DATE

See signed instructions under instructions on reverse side of this form

I, the undersigned, as Secretary of the Corporation, the Secretary of the Corporation, hereby certifies that the information contained herein is true and correct and is submitted in accordance with the provisions of Chapter 807 F.S.

[Signature]

Gateley M. Daniel

President

June 14, 1989

813-939-5511

See instructions for
registered agent
information on reverse

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

PS-272826

CORPORATION

ANNUAL REPORT
1990



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

59 JUL 12 AM 2:12

Read Notice and Instructions on Other Side Before Mailing Entry
Filing Fee of \$35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

559104 5

ZIP + 4 PRESORT

**GATELEY DANIEL CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907-1151**

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida

02/07/1978

4. FEI Number

59-1796864

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State	5. Zip Code
P/D	DANIEL, GATELEY N	1137 N TOWN & RIVER DR	FT MYERS, FL	00000
B	DANIEL, JUNE F	1137 N TOWN & RIVER DR	FT MYERS, FL	00000
V	HAMM, ENE	136 ANCHORAGE STREET	FT MYERS BEACH, FL	
P/S	HAMM, ENE	136 ANCHORAGE STREET	FT. MYERS BEACH, FL	33931
V/T	DANIEL, SCOTT N.	1137 N. TOWN & RIVER DR.	FT. MYERS, FL	33919

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**DANIEL, GATELEY N
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907**

8. Name and Address of New Registered Agent

Name 81

HAMM, ENE

Street Address 1 (Do NOT Use P.O. Box Number) 82

1700 MEDICAL LANE

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84

FT. MYERS

FL.

Zip Code 85

33907

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on **June 29, 1990**.

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 FS.

SIGNATURE

Ene Hamm
(Registered Agent Accepting Appointment)

DATE **6/29/90**

10. I 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 effects as if made by me. I further certify 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, FS.

Signature

Ene Hamm

Date **6/29/90**

ENE HAMM

PRESIDENT

813-939-5511

CERTIFICATE OF STATUS DESIRED

\$5 Additional Fee
required for a
Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

**CORPORATION
ANNUAL REPORT
1991**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED

**APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED**

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT #559104 (5)**
ZIP + 4 PRESORT

**GATELEY DANIEL CORPORATION
1700 MEDICAL LANE
FT MYERS, FLORIDA 33907-1151**

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

3. Date Incorporated or Qualified
To Do Business in Florida

02/07/1978

4. FEI Number

59-1796884

FEI Number Applied For

FEI Number Not Applicable

5. **\$8.75**

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1. P/S	HAMM, ENE	138 ANCHORAGE STREET	FT MYERS, FL 00000
2. V/T	DANIEL, SCOTT M.	1137 N TOWN & RIVER DR	FT MYERS, FL 00000
3.			
4.			
5.			
6.			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**HAMM, ENE
1700 MEDICAL LANE
FORT MYERS, FL 33907**

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City

FL

85 Zip Code

9. 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 _____
(Registered Agent Accepting Appointment)

DATE _____

10. I 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. I further certify 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 6 on an attachment with an address.

SIGNATURE *Ene Hamm*
Typed Name of Signing Officer or Director
ENE HAMM

Title
PRESIDENT

DATE **6-6-91**
Telephone Number (Daytime)
(813-) 939-5511

FILING FEE OF \$61.25 REQUIRED--Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required**

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
JAN SMITH
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL
FILED

FILING FEE \$61.25 Make Payable To: Secretary of State

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT # 559104 (5)**

**GATELEY DANIEL CORPORATION
1700 MEDICAL LANE
FORT MYERS FL 33907-1151**

2. If Appointed in Block 1 is incorrect in any way, fill through the
current information and enter the correct address below. If a
Block is acceptable, the NAME of the corporation can be changed
only by filing an amendment.

21. Mailing Address

22. P.O. Box No.

23. City and State

3. Date Incorporated or Qualified
To Do Business in Florida **02/07/1978**

If the address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

3a. Date of Last Report **06/11/1991** 4. FEI Number **59-1796864** FEI Number Applied For **5. \$8.75**
FEI Number Not Applicable **CERTIFICATE OF STATUS OF DIRECTOR**

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1. Title	2. Names of Officers and Directors	3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4. City and State
1. P/S	HAMM, ENE	136 ANCHORAGE STREET	FT MYERS, FL 00000
2. V/T	DANIEL, SCOTT N.	1137 N TOWN & RIVER DR	FT MYERS, FL 00000
3.			
4.			
5.			
6.			

REGISTERED AGENT INFORMATION

8. Name and Address of Newly Registered Agent

81. Name
82. Street Address 1 (Do NOT Use P.O. Box Number)
83. Street Address 2 (Do NOT Use P.O. Box Number)
84. City **FL** 85. Zip Code

**HAMM, ENE
1700 MEDICAL LANE
FORT MYERS, FL 33907**

9. If you are the president of Sections 607 (500) and 607 (500) or Sections 617 (500) and 617 (500) Florida Statutes, the above-named corporation certifies that it is not changing its registered office or registered agent, as both in the State of Florida. Such change was authorized by the corporation's board of directors. If you are not the president of the corporation, you must attach the signature of the president of the corporation to the above-named corporation's registered agent information.

10. (Registered Agent Accepting Appointment) DATE

11. I, the undersigned, hereby certify that the information furnished on this annual report is true and accurate and that I am a resident of the State of Florida and that I am an officer or director of the corporation or the individual or partnership engaged to prepare the report required by Chapter 607, Florida Statutes, and that my name appears in Block 6 on an attachment with an address.

SIGNATURE *Ene Hamm* 6/8/92
Ene Hamm President 813 939-5511

7 27 93 8/3 93% 2511

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

94 MAY -1 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1994 GATELEY DANIEL CORPORATION 1700 MEDICAL LANE FT MYERS FL 33907		DOCUMENT # 559104 (5)	
2. [Blank]		26. Physical Physic of Burial SAME	
27. [Blank]		27. [Blank]	
28. [Blank]		28. [Blank]	
29. [Blank]		29. [Blank]	
30. [Blank]		30. [Blank]	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
81	Name	81	Name
82	Street Address	82	Street Address
83	City	83	City
84	State	84	State
85	Zip	85	Zip

[illegible]

15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1041 1042 1043 1044 1045 1046 1047

P/S	10000	
HAMM, ENE	10000	
176 ANCHORAGE STREET	10000	
FT MYERS, FL 00000	10000	
Y/T	10000	
DANIEL SCOTT N.	10000	
1137 N TOWN & RIVER DR	10000	
FT MYERS, FL 00000	10000	

[illegible]

SIGNATURE: Eric Hamm 4/29/91 813 939-5511

FILE NOW; FILING FEE AFTER MAY 1 IS \$225.00

1995



DEPARTMENT OF CORPORATIONS

DOCUMENT # 559104

(5)

GATELEY DANIEL CORPORATION

APPROVED
AND
FILED

90 MAY -1 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

a. Principal Address 1700 MEDICAL LANE FT MYERS FL 33907		b. Mailing Address 1700 MEDICAL LANE FT MYERS FL 33907	
3. Date Incorporated or Qualified 02/07/1978		2a. Date of Last Report 05/01/1994	
2. Office of Registered Agent 21. 4755 Summerlin Road 22. Suite 5 23. Ft. Myers, FL		2b. Mailing Address 24. 4755 Summerlin Road 25. Suite 5 26. Ft. Myers, FL	
27. 33919		28. Lee	
29. 33919		30. Lee	
5. Certificate of Status (Owner) ☐ \$8.75 Annual Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 (May 1 Added to Fee)	
7. This corporation has liability for income tax under S. 1361(a) Florida Statutes ☐ Yes ☒ No			

DO NOT WRITE IN THIS SPACE

B. Name and Address of Current Registered Agent

HAMM, ENE
1700 MEDICAL LANE
FORT MYERS FL 33907

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number or Post Office)	4755 Summerlin Road
83. Suite	Suite 5
84. City	Fort Myers
85. State	FL
86. Zip	33919

11. I, the undersigned, being duly sworn, depose and say that the above named corporation is a corporation organized under the laws of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation.

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME	PS HAMM, ENE	1. NAME	
2. STREET ADDRESS	136 ANCHORAGE STREET	2. STREET ADDRESS	
3. CITY, STATE, ZIP	FT MYERS, FL 00000	3. CITY, STATE, ZIP	
4. NAME	VT DANIEL, SCOTT N.	4. NAME	
5. STREET ADDRESS	1137 N TOWN & RIVER DR	5. STREET ADDRESS	
6. CITY, STATE, ZIP	FT MYERS, FL 00000	6. CITY, STATE, ZIP	
7. NAME		7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY, STATE, ZIP		9. CITY, STATE, ZIP	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY, STATE, ZIP		12. CITY, STATE, ZIP	
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY, STATE, ZIP		15. CITY, STATE, ZIP	
16. NAME		16. NAME	
17. STREET ADDRESS		17. STREET ADDRESS	
18. CITY, STATE, ZIP		18. CITY, STATE, ZIP	

14. I, the undersigned, being duly sworn, depose and say that the above named corporation is a corporation organized under the laws of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation.

SIGNATURE: *Ene Hamm*

ENE HAMM

5-1-95 813-939-5511