559104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

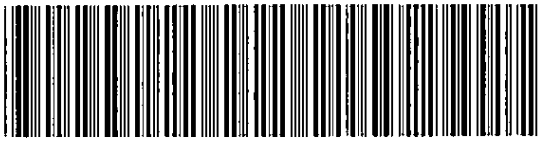
(Business Entity Name)

(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: RBW

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. GRADDY
ALBERT M. FRIERSON
HUGH E. STARNES
ERNEST M. HATCH, JR.
STEPHEN L. HELGEMO
RONALD W. SHALLEY
PATRICK E. GERAGHTY
JOHN G. HOLST, JR.
JOHN A. NOLAND
KEMPTON R. LOGAN
KIM P. 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. HENDERSON, JR. (1892-1954)
JAMES A. FRANKLIN (1895-1964)
TALLAHASSEE E. STARNES (RETIRED)

January 27th, 1978

59878

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

AM

31 8 - 707
31 7 - 706
31 6 - 705
31 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
for William N. Horowitz

WNH/kb
Enclosures

PRIVILEGE TAX
C. TAX 30
FILING 15
C. COPY 15
R. A. FEE 3
P. COPY
SERVICE
Total 63
BALANCE DUE

FILED
FEB 7 11 45 AM '76
SECRETARY 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:

NAME	ADDRESS
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:

NAME	ADDRESS
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.

Gateley N. Daniel

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, 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.

Notary Public

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES DEC. 5 1981
BONDED THRU GENERAL INS. UNDERWRITERS

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
MAY 11 1 12 AM 979
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	D	2938 CLEVELAND AVE	FT MYERS, FL
DANIEL, JUNE F.	D	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

4 **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.

DO NOT WRITE IN THIS SPACE

Typed Name of Signing Officer: Gateley N. Daniel

Title: President

Telephone Number: 813-334-2105

Signature: Gateley N. Daniel

Date: 5/18/79

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

03-30-79 2 $ 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

SECRETARY 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: 2/07/1978

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 & RiverDrive ~~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 Mc 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.

8. **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: Gateley N. Daniel
Date: March 26, 1980

DO NOT WRITE IN THIS SPACE
GH 4 25 80

559104 04-15-80 2 5 1195 10.00

(Form COR 520) Rev. 11/18/79

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

CORPORATION ANNUAL REPORT

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

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

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 (BATELEY) CORPORATION
1100 MEDICAL LANE
FT MYERS, FLORIDA 33907

If above address is incorrect in any way, enter the correct address, including 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 No. Number (FEIN): 59-1796864

5. Date of Last Report: 1980

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, BATELEY N	P/D	1137 N IOWN E RIVER DR	FT MYERS, FL
DANIEL, JUNE F.	D	1137 N. IOWN E RIVER DR	FT MYERS, FL
MILLER, SHERRY A.	V	8611 CYPRESS LAKE DR	FT MYERS, FL
DAVIDSON, JOHN C.	V	2950 MC GREGOR BLVD	FT MYERS, FL
Engligh, James D. Jr.	V	Rt. 2, Box 36	Alva, FL

7. Registered Agent Information

Name
DANIEL, BATELEY N
Street Address (Do NOT Use P.O. Box Number)
1100 MEDICAL LANE
City, State and Zip Code
FT MYERS, FLORIDA 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 $5.

8. Signature (See instructions 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 To the Best of My Knowledge, All Facts Stated In This Report Shall Have the Same Legal Effect As If Made Under Oath.

Name and Capacity of Typed or Printed

Title

Telephone Number

Signature

Date

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

CORPORATION ANNUAL REPORT 1982

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
FEB 15 4:42 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

Street Address

P.O. Box No.

City

State

Date Incorporated or Qualified to Do Business in Florida: 02/07/1978

Federal Employer Identification Number (FEI): 59-1796864

Date of Last Report: 05/07/1981

Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address	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

Name and Address of Current Registered Agent

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

Name and Address of New Registered Agent

Name

Street Address

City, State and Zip Code

DATE

SIGNATURE

Registered Agent Accepting Appointment

$3.00 additional fee required for Registered Agent changes.

Signature: [signature]

Gateley N. Daniel

Title: President

Date: [handwritten date, January 11, 1982]

(813) 939-5531

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 AND 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*

1. Name and Address of Corporation Principal Office

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

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

Incorporated or Qualified to Transact Business in Florida	Federal Employer Identification Number (if any)	Date of Last Report
02/07/1978	59-1796864	02/01/1982

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 DR	FT MYERS, FL
DANIEL, JUNE F.	D	1137 N TOWN & RIVER DR	FT MYERS, FL
~~MILLER, SHERRY A.~~	~~V~~	~~6631 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 86~~	~~ALVA, FL~~

Registered Agent Information

I. Name and Address of Current Registered Agent

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

II. Name and Address of New Registered Agent

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

Pursuant to the provisions of Sections 607.034 and 617.023, Florida Statutes, the undersigned corporation, organized under the laws of the State of ..., 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 ______

Signature ______ DATE ______
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See Signature Instructions under Item 1 on reverse side of this form

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 Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

[signature]

Date: March 14, 1983

GATELEY N. DANIEL President 813-939-5511

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

CORPORATION ANNUAL REPORT

1984

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

DO NOT WRITE IN THIS SPACE

Jun 23 10 AM 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

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

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: 02/07/1976

4. Federal Employer Identification Number (FEIN): 59-179864

5. Date of Last Report: 04/27/1983

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
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

DANIEL, GATELEY N
1700 MEDICAL LANE

FT MYERS,FLORIDA 33907

8. Name and Address of New Registered Agent

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 F[illegible] 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 _____

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
Gateley N. Daniel	June 16, 1984

Typed Name of Signing Officer	Title	Telephone Number
Gateley N. Daniel	President	813-939-5511

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 6001 (84)

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT

1985

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

APPROVED
AND
FILED

AUG -7 PM 12 45

◀ 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 Principal Office:

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

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

2 Enter Change of Address or Corrected Principal Office (P.O. Box Number Address NOT Sufficient)

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	4 Federal Employer Identification Number (FEI)	5 Date of Last Report
02/07/1978	59-1796864	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

9 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 _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form

10 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.
(Officer signing must be listed in Block 6)

Signature	Date
Ene Hamm	August 1, 1985
Typed Name of Signing Officer: ENE HAMM	Title: Vice President
	Telephone Number: 813-939-5511

CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

CR2E034 (7-85)

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

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
Jim Smith
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 Current Name and Address of Corporation as Presently on File

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

2 Enter Change of Address or Corporation Mailing 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 Date of Incorporation or Qualified to Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
02/07/1978	59-1796864	08/07/1985

6 Name and Street Address of Each Officer and Director as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director 3 (Do NOT Use Post Office Box Numbers)	City and State 4
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

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 FL. Zip Code 84

Pursuant to the provisions of Sections 607.104 and 607.107, 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.

The change was authorized by resolution duly adopted by its board of directors or

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

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature requirements 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. All officers signing must be listed in Block 6.

Ene Hamm June 11, 1986

9 Name of Signing Officer	10 Title	11 Telephone Number
Ene Hamm	Vice President	813-939-5511

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
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

1 Name and Address of Corporation Principal Office

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

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 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 Federal Employer Identification Number (FEIN): 59-1796864

5 Date of Last Report: 06/17/1986

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

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
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	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

8. Name and Address of New Registered Agent

Name 81

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: FL.

Zip Code 85

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.

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

Having been named to accept the appointment of registered agent, I am familiar with and accept the obligations of, Section 607.325 F.S.

_____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes

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

I Hereby 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.
All Fields Must Be Completed in Block 81

Signature: Gateley N. Daniel

Date: June 24, 1987

Gateley N. Daniel — President

Telephone Number: 813-939-5511

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E034 (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

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 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. Federal Employer Identification Number (FEIN): 59-1796854

5. Date of Last Report: 07/06/1987

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

1. 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
HAMM, 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 Number) 82

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

City and State 84 FL. Zip Code 85

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 ....

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 ....

10. If a foreign corporation, date first transacted business in Florida ....

See signature restrictions 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 Further 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.)

Signature: [signature] Date: 5/24/88

Typed Name of Signing Officer or Director: GATELEY N. DANIEL

Title: PRESIDENT

Telephone Number: 813-939-5511

11. This space, ... a certificate of status ... the box

CERTIFICATE OF STATUS DESIRED

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

FLORIDA DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

1. 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 of Corporation Principal Office, P.O. Box Number, or Suite Number.

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. Federal Employer Identification Number (FEIN): 59-1796864

5. Date of Last Report: 06/15/1988

6. Names and Street Addresses of Each Officer and Director as of December 31, 1988

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
P/D	DANIEL, GATELEY N	1137 N TOWN & RIVER DR	FT MYERS, FL	00000
D	DANIEL, JUNE F	1137 N TOWN & RIVER DR	FT MYERS, FL	00000
V	HAMM, [illegible]	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 Number) 82

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

City and State 84: FL.

Zip Code 85

Pursuant to the provisions of Sections 607.324 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.

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

Signature: ______ DATE ______
Registered Agent Accepting Appointment

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

I, the undersigned officer or director of the corporation, the receiver or trustee empowered to execute this report as required by Chapter 607 F.S., hereby certify that the information on this report is true and accurate and that my signature on this report shall have the same legal effect as if made under oath.

Gateley N. Daniel — President

Date: June 14, 1989

Telephone Number: 813-939-5511

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

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT

1990

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

90 JUL 13 PM 2:12

Print Type or Use Typewriter. See Other Side Before Making Entries.

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

Type 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
~~P/D~~	~~DANIEL, GATELEY N~~	~~1137 N TOWN & RIVER DR~~	~~FT MYERS, FL 00000~~
~~D~~	~~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. The 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 F.S.

SIGNATURE Ene Hamm DATE 6/29/90
(Registered Agent Accepting Appointment)

10. I hereby 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, F.S.

Signature: Ene Hamm Date: 6/29/90

ENE HAMM — PRESIDENT — 813-939-5511

(Name of Officer or Director Listed) (Title) (Telephone Number)

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

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

JUN 11 '91

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

PLEASE TYPE

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 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

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 1	Names of Officers and Directors 2	Street Address of Each Officer and Director 3 (Do NOT Use Post Office Box Numbers)	City and State 4	
1	P/S	HAMM, ENE	138 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

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 _____ DATE _____
(Registered Agent Accepting Appointment)

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; and that my name appears in Block 1 or 2 on an attachment with an address.

SIGNATURE Ene Hamm DATE 6-6-91

Typed Name of Signing Officer or Director: ENE HAMM

Title: PRESIDENT

Telephone Number Daytime: (813-) 939-5511

FILING FEE OF $61.25 REQUIRED--Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

CR2E041 (6/91)

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

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

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

DO NOT WRITE IN THIS SPACE

FILING FEE $61.25 Make Payable To: Secretary of State

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

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

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

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box 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 — 24 Zip Code

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

3a. Date of Last Report: 06/11/1991

4. FEI Number: 59-1796864

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.)

	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

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 or Sections 617.0502 and 617.1508, 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 ______________________ DATE ________
(Registered Agent Accepting Appointment)

10. Corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax)

11. I hereby certify that the information supplied 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 6 or on attachment with an address.

SIGNATURE *Ene Hamm* 6/8/92

Ene Hamm — President — 813 939-5511

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER JULY 28, 1993.
AMOUNT DUE ON OR BEFORE 7/28/93 $225 (IF DISSOLVED MINIMUM AMOUNT DUE TO REINSTATE: $375)

ANNUAL REPORT 1993

Secretary of State
DIVISION OF CORPORATIONS

FILED
93 JUL 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 559104 (6)

P90106671
GATELEY DANIEL CORPORATION
1700 MEDICAL LANE
FT MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/07/1978
3a. Date of Last Report: 06/17/1992
4. FEI Number: 59-1796864

FILING FEE $225.00
Annual Report $61.25 + $138.75 Corporation Supplemental Fee + $25.00 Late Fee
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

2a. Principal Place of Business
26 1700 MEDICAL LANE
27
28 FT MYERS FL
29 33907
25
30

5. Certificate of Status Desired — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees
7. Exempt from Supplemental Fee — $138.75 Supplemental Fee Not Required
8. Florida Statutes Yes No

9. 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 is Not Acceptable)
83
84 City FL
85 Zip Code

11

DATE

12 OFFICERS AND DIRECTORS

P/S
HAMM, ENE
136 ANCHORAGE STREET
FT MYERS, FL 00000

V/T
DANIEL, SCOTT N.
1137 N TOWN & RIVER DR
FT MYERS, FL 00000

13. CHANGES TO OFFICERS AND DIRECTORS

SIGNATURE: Ene Hamm ENE HAMM 7 29 93 813 939 5511

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1994

DOCUMENT #

559104 (5)

APPROVED AND FILED

94 MAY -1 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GATELEY DANIEL CORPORATION

1700 MEDICAL LANE
FT MYERS FL 33907

Principal Place of Business

1700 MEDICAL LANE
FT MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/07/1978

3a. Date of Last Report: 07/30/1993

2a. Principal Place of Business: SAME

4. FEI Number: 59-1796864

5. Certificate of Status Desired: $8.75

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

7. Supplemental Fee

8. Florida Statutes [ ] Yes [ ] No

9. 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 is Not Acceptable)

83

84 City FL 85 Zip Code

13. CHANGES TO OFFICERS AND DIRECTORS

P S
HAMM, ENE
176 ANCHORAGE STREET
FT MYERS, FL 00000

V/T
DANIEL, SCOTT N.
1137 N TOWN & RIVER DR
FT MYERS, FL 00000

SIGNATURE: Eric Hamm 4/29/94 813 939-5511

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 559104 (5)

GATELEY DANIEL CORPORATION

Principal Business	Mailing Address
1700 MEDICAL LANE FT MYERS FL 33907	1700 MEDICAL LANE FT MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/07/1978
3a. Date of Last Report: 05/01/1994

21. Street Address of Business	26. Mailing Address	4. FEI Number: 59-1796864
4755 Summerlin Road	4755 Summerlin Road	
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Suite 5	Suite 5	
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May be Added to Fee
Ft. Myers, FL	Ft. Myers, FL	
24. Zip: 33919 25. County: Lee	29. Zip: 33919 30. County: Lee	8. This corporation has liability for insurance tax under S. 440.02 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HAMM, ENE
1700 MEDICAL LANE
FORT MYERS FL 33907

10. Name and Address of New Registered Agent

31. Name:
32. Street Address (P.O. Box Number is Not Acceptable): 4755 Summerlin Road
33. Suite 5
34. City: Fort Myers FL 35. Zip Code: 33919

11. Pursuant to the provisions of Sections 607.0501 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its 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:

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
PS HAMM, ENE 136 ANCHORAGE STREET FT MYERS, FL 00000	☐ Change ☐
VT DANIEL, SCOTT N. 1137 N TOWN & RIVER DR FT MYERS, FL 00000	☐ Change ☐
	☐ Change ☐
	☐ Change ☐
	☐ Change ☐
	☐ Change ☐

11. I hereby certify that the information supplied with this filing is accurate. For profit corporations only: I am a director or officer 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 13 above, or on an attachment with an asterisk.

SIGNATURE: Ene Hamm 5-1-95 813-939-5511

ENE HAMM