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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 DOCUMENT # 572444 (8)A HANSEL AND GRETEL, INC. Principal Place of Business Mailing Address 107 PALMETTO DUNES CIR 107 PALMETTO DUNES CIR NAPLES FL 34113-7559 NAPLES FL 33940 US 3. Date Incorporated or Qualified 3a. Date of Last Report 05/19/1978 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1931230 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 LITTLE, MARK S. 107 PALMETTO CIR Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33940 63 RA City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Jam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition Change PD DELETE 1.1 TITLE THLE LITTLE, MARK S. NAME 1.2 NAME 107 PALMETTO DUNES CIR STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CITY-ST-ZIP CHTY-ST-ZIF DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - 51 - 7(P 5.4 CITY - ST-ZIP DELETE Change Addition 61 TITLE TITLE 62 NAME NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truetee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Blu

SIGNATURE:

**FILED** 

Feb 03 1997 8:00am

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