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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 585626

(5)

BATSON, CARNAHAN & CO., P.A.

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Principal Place of Business Mailing Address					188 6 6 10		
8211 COLLEG		8211 COLLEGE PKWY.					
FT. MYERS FL 33919		FT. MYERS FL 33919			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	
						10/01/1978	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				59-1840230 Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				S8.75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country			8. This corporation owes or has paid the current year Intangible	
24	25 9. Name and Address of Currer	29	30	10		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
-		it nogistored Agent		81	Name	(U. Maine and Address of New Negletered Agent	
	TSÓN, ROBERT J.		Į				
	I1 COLLEGE PKWY.		l	82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
rı.	MYERS, FL LP 33919		ŀ	83	,		
			1				
				84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the ab	ove	-named corp	poration submits this statement for the purpose of changing its registered	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE							
40	Signature, typed or printed name of registered age	no and title if applicable (NO D DIRECTORS	TE Registered	Age	nt signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	VO	DELETE		1.1 TITLE		Change Addition	
NAME	DOYLE, DONNA J.	/	1.2 NAME				
STREET ADDRESS	8211 COLLEGE PKWY.		a		ADDRESS	1	
CITY-ST-ZIP	FT MYERS, FL 00000		1.4 City-ST-Zi				
TITLE	STD	DELETE		2.1 TITLE		Change Addition	
NAME	BATSON, ROBERT J		2.2 NAME				
STREET ADDRESS	8211 COLLEGE PKWY.		2.3 \$14	REET	ADDRESS		
CITY-ST-ZIP	FT MYERS, FL 00000		2. 4 CI	TY-S	ST-ZIP		
TITLE	PD	☐ DELETE	3.1 T(T	3.1 TITLE		Change Addition	
NAME	CARNAHAN, THOMAS		3.2 NAME		-		
STREET ADDRESS	8211 COLLEGE PKWY.		3.3 STREE		ADDRESS		
CITY-ST-ZIP	FT MYERS, FL 00000			3.4. CITY- ST-			
TITLE		☐ DELETE	4.1 TETLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET AD				
CITY-ST-ZIP		DELETE		4.4 CITY-ST-ZIP		Change Addition	
TITLE		ר"ו הנרבונ		5.1 TITLE		Change Li Adoliton	
NAME			5.2 NAME		ADDDECO		
STREET ADDRESS			5.3 STREET ADDI				
CITY-ST-ZIP TITLE		☐ DELETE		5.4 CITY - ST - ZIP		☐ Change ☐ Addition	
NAME		C) oftent	6.1 TITLE 6.2 NAME			_ Change _ Raughth	
					ADDRESS		
STREET ADDRESS							
CITY - ST-ZIP			6.4 CIT	11-5	1-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackness.