

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

FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 587413 (6)
 1. Corporation Name
M.L.S. OF BONITA SPRINGS, INC.



Principal Place of Business 27313 OLD 41 ROAD SE BONITA SPRINGS FL 33923 US	Mailing Address 27313 OLD 41 ROAD SE BONITA SPRINGS FL 33923 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 25 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 30 Country		3. Date incorporated or Qualified 09/25/1978
4. FEI Number 59-1874712		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent SPEAR, JOHN D SUNSHINE PROFESSIONAL PLAZA 9200 BONITA BEACH, ROAD BONITA SPRINGS FL 34135		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	
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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 Edward R. Zant TRUMAN EDWARD R. ZANT
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P <input checked="" type="checkbox"/> DELETE NAME MEASE, ROD F. STREET ADDRESS 3960 DI DEL REY CITY-ST-ZIP BONITA SPRINGS FL	1.1 TITLE P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME BILL HOPMANN 1.3 STREET ADDRESS 27313 Old 41 Rd. SE 1.4 CITY-ST-ZIP Bonita Springs, FL 34135	TITLE S <input checked="" type="checkbox"/> DELETE NAME KATZ, CHARLOTTE STREET ADDRESS 3870 BONITA BCH RD. CITY-ST-ZIP BONITA SPRINGS FL	2.1 TITLE P.E./D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME JOHN MITCHELL 2.3 STREET ADDRESS 27313 Old 41 Rd. SE 2.4 CITY-ST-ZIP Bonita Springs, FL 34135
TITLE T <input type="checkbox"/> DELETE NAME ZANT, EDWARD STREET ADDRESS 9040 BONITA BEACH ROAD CITY-ST-ZIP BONITA SPRINGS FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TITLE D <input checked="" type="checkbox"/> DELETE NAME BURDICK, DAN STREET ADDRESS 3870 BONITA BEACH ROAD CITY-ST-ZIP BONITA SPRINGS FL	4.1 TITLE S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME GAIL CARLINE 4.3 STREET ADDRESS 27313 Old 41 Rd. SE 4.4 CITY-ST-ZIP Bonita Springs, FL 34135
TITLE D <input checked="" type="checkbox"/> DELETE NAME DOUGLAS, VICKIE STREET ADDRESS 9040 BONITA BEACH ROAD CITY-ST-ZIP BONITA SPRINGS FL	5.1 TITLE E-VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME LINDA LANG 5.3 STREET ADDRESS 27313 Old 41 Rd. SE 5.4 CITY-ST-ZIP Bonita Springs, FL 34135	TITLE D <input checked="" type="checkbox"/> DELETE NAME HARNAR, HARRIET STREET ADDRESS 3451 BONITA BAY BLVD #202 CITY-ST-ZIP BONITA SPRINGS FL	6.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6.2 NAME MAR/LOU WITSKEN 6.3 STREET ADDRESS 27313 Old 41 Rd. SE 6.4 CITY-ST-ZIP Bonita Springs, FL 34135

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 attachment with an address.

SIGNATURE: Edward R. Zant 4/17/98 907-49077

CR2E034 (10/97)