2000 UNIFORM BUSINESS RE

DOCUMENT # 587413 1. Entity Name

FILED Feb 16, 2000 8:00 am Secretary of State 02-16-2000 90001 013 ***150.00

M.L.S. OF BONITA SPRINGS, INC.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BOUNTA SPRINGS FL 34135 Sulfe, April 4, etc. City & State City & Stat		٠, .		ž			1					
BOURTA SPRINGS FL 39823 SUBLA APL V. etc. DO NOT WARTE IN THIS SPACE Cry & State DO NOT WARTE IN THIS SPACE A FEI Number SP-187412 DO NOT WARTE IN THIS SPACE SPARA JOHN D. SPACE STATE A FEI Number SP-187412 SPACE STATE COUNTY S. Certificate of Status Desired SPA. 78 Additional Fee Required Fee Required SPARA JOHN D. SPACE STATE SPACE JOHN D. SPA	Principal Place of Business Mailing Address											
Sules, Apt. #, etc. Cov. & State	27313 OLD 41 ROAD SE BONITA SPRINGS FL 33923 US			BONITA SPRINGS FL 34135-5410				B9012788				
City & State Ci	2. Principal Place of Business			3. Mailing Address								
Symbol S	Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WR	ITE IN THIS	SPACE	6 (.	
Zip Country Zip Country S. Certificate of Status Desired S. 75 Addisional Fee Required S. Name and Address of Current Registered Agent Name SPEAR, JOHN D SUNSHINE PROFESSIONAL PLAZA 9200 BONTTA SPRINGS FL 34135 City FL Zip Code	City & State			City & State			4	. FEI Number 50-18747 1			pplied For	
SPEAR, JOHN D SUNSHINE PROFESSIONAL PLAZA 9200 BONITA BEACH, ROAD BONITA SPRINGS FL 34135 The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its intangible Tax fing requirement and sects to do so. Ake MAY 1, 2000 Fee with be \$55.00 Ake Check Payable to Department of the State of Florida. FILE NOW!! FEE IS \$150.00 Ake Check Payable to	Zip		Country	Zip Country			5			\$8.75 Ad	dditional	
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SPEAR, JOHN D SUNSHINE PROFESSIONAL PLAZA 3200 BONTA SPANGS FL 34135 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Surface, typed or in read name develor to do so (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. Change PO White HOPMANN, BILL STREET ADDRESS OTY-S1-2P BONTA SPRINGS FL 34135 THE PO WHOSE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE PO WHO HAVE AND HIP OFFICERS AND DIRECTORS THE AND HIP OFFICERS THE		6. Name	and Address of Current F	Registered Agent		Namo	7.	. Name and Address of New I	Registered A	Agent		
SUNSHINE PROFESSIONAL PLAZA 3200 BONITA SPRINGS FL 34135 City City FL Zip Code City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, hose of or rides tame of registered agent and the II quotisate 9. This corporation is eligible to satisfy its Intanglible Task tiling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TILE HOPMANN, BILL STRET ADDRESS 27313 OLD 41 RD SE BONITA SPRINGS FL 34135 TILE PD UPDeds ITILE FO LIP Deds ITILE SINEET ADDRESS 27313 OLD 41 RD SE BONITA SPRINGS FL 34135 TILE TANK MAKE ZANT, EDWARD MITCHELL, JOHN MITCHELL, JOHN MITCHELL, JOHN MITCHELL, JOHN STREET ADDRESS 27313 OLD 41 RD SE BONITA SPRINGS FL 34135 TILE TO CONTY-ST-2P BONITA SPRINGS FL 34135 TILE TO CONTY-ST-2P BONITA SPRINGS FL 34135 TILE SIREET ADDRESS 27313 OLD 41 RD SE COTY-ST-2P BONITA SPRINGS FL 34135 TILE SIREET ADDRESS 27313 OLD 41 RD SE COTY-ST-2P BONITA SPRINGS FL 34135 TILE SD COTY-ST-2P COTY-ST-2P BONITA SPRINGS FL 34135 TILE SD COTY-ST-2P BONITA SPRINGS FL 34135 TILE SD COTY-ST-2P COTY-ST-2P BONITA SPRINGS FL 34135 TILE SD COTY-ST-2P COTY-				Name			رومين	and the second s				
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Signature, propose or primed name of registered apert and till it application. 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.	8. The above	named entity	y submits this statement for	the purpose of changing its	register	ed office or	registered a	agent, or both, in the State of Fl	orida.			
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Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. \$5.00 Make Check Payable to Department of State	SIGNATURE .	Signature, typed	or printed name of registered agent ar	nd title if applicable. (NOT	E: Registere	d Agent signat	ure required when	n reinstating)	DATE			
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13. Thereby 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	CITY-ST-ZIP	BONITA S	SPRINGS FL 34135	···	CITY	-ST-ZIP						
indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.												