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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 622503 1. Corporation Name

CLEVELAND MARKET, INC.

Principal Place of Business			Mailing Address						, 4.4,1 2151, 1427
1732 STEADLEY AVE PUNTA GORDA FL 33950-6099			1732 STEADLEY AVE PUNTA GORDA FL 33950-6099				DO NOT WRITE IN T	HIS SPACE	
US		US					3. Date Incorporated or Qualifed 05/21/1979		
2 Principal P	ace of Business	2a.	Mailing Address				4. FEI Number	17/	Applied For
 1 '	ace of business	26	realiting / tautious				59-1908004	— ——	Not Applicable
Suite, Apt.	#. etc.	201	Suite, Apt. #, etc.					\$8.75	Additional
22		27	• •				5. Certificate of Status Desired	- Fee f	Required
City & State	e	1-1	City & State		-		6. Election Campaign Financing	\$5.0	May Be
23		28					Trust Fund Contribution	Added	to Fees
Zip	Country		Zip	Co	untry		8. This corporation owes the current year	Intangible	1
24	25	29		30			Personal Property Tax.	¥ Yes	□No
	9. Name and Address of Curre	nt Regist	tered Agent				10. Name and Address of New Register	ed Agent	
					81	Name			
	ERS, DONALD N.				82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·	
	STEADLEY AVE								
PUN	ta g ord a fl 33950				83				
					84	City		. 85 Zij	Code
					04	City	ı	FL 63 2"	70000
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florid pations of,	a. Such change was a Section 607.0505, Fk	authorize orida Sta	d by tutes.	the corpora	orporation submits this statement for the purpositation's board of directors. I hereby accept the appured when reinstating)	pointment as	registered
12.	Signature, typed or printed name of registered ag OFFICERS A			13.		i signature requ	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	PD	NO DINE	DELETE		TTLE		7.257.107.107.07.07.07.07.07.07.07.07.07.07.07.07.0	☐ Change	
	ROGERS, DONALD N.				AME				
NAME	1732 STEADLEY AVE.					ADDRESS			
STREET ADDRESS	PUNTA GORDA FL			ı	CITY-SI				ļ
CITY-ST-ZIP	S		☐ DELETE		IITLE	1-21-		Change	e
TITLE	SAVASUK, MICHELLE A.				IAME			_ •	_
NAME	425 WEST ANN ST.					ADDOCCO			ĺ
STREET ADDRESS						ADDRESS			i
CITY-ST-ZIP	PUNTA GORDA FL		☐ DELETE		CITY-S TITLE	1-212		Change	e Addition
TITLE							•	,	_
NAME					AME	ADDRESS			
STREET ADDRESS						1			
CITY-ST-ZIP			☐ DELETE		CITY-S TITLE	1-212		Chang	e Addition
TITLE					NAME	İ			_
NAME						FADDDEDO			
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP			☐ DELETE		CITY-ST	1-217		☐ Chang	e Addition
TITLE					VAME		•	_ ~	_
NAME						ADDRESS			ľ
STREET ADDRESS					CITY-S				Ì
CITY-ST-ZIP			☐ DELETE		TITLE			☐ Chang	e 🔲 Addition
TITLE					NAME				
NAME STREET ADDRESS				6.3 9	STREET	ADDRESS			
SIRECIADURESS	İ					1			,

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, with all other like empowered.

6.4 CITY-ST-ZIP

PRINTED NAME TO THE PRINTED PRINTED NAME OF DIRECTOR

(941) 639-2568