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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 633830

## FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90176 045 \*\*\*150.00

	CAN SOUTH CENTRAL INC.						
·	ce of Business	Mailing Address					
4036 EDISON AVE.         4036 EDISON AVE.           FORT MYERS FL 33916-1830         FORT MYERS FL 33916-1830					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					08/13/1979		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2287678		Not Applicable
"Suite, Apt:	#, etc.	Sulte, Apt. #, etc.			5. Certifcate of Status Desired	<b>*</b> *	Additional Required
City & Star	te	City & State			6. Election Campaign Financing	\$5.0	May Be
23		28			Trust Fund Contribution	Adde	to Fees
Zip	Country	Zip	Country	1	8. This corporation owes the current year		<b>-</b>
24	25		30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Currer	nt Registered Agent	81	Nores	10. Name and Address of New Registe	red Agent	
GEO	DRGE, ROBERT B., JR.		81	Name			
1245 SABAL DRIVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	FORT MYERS FL 33903		83				
••••	0111 1111 12 13 13 13 13 13 13 13 13 13 13 13 13 13		03	'}			
			84	City	1	FL 85 Zit	Code
office or t agent. I a SIGNATURE	am familiar with, and accept the obliga	ations of, Section 607.0505, Flor	nda Statutes	·	on's board of directors. I hereby accept the a		egistered
12.	OFFICERS At		13.	in signature require			
TITLE					ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	ORS IN 12
	I PD	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	S AND DIRECT	
NAME	' <del>-</del>				ADDITIONS/CHANGES TO OFFICERS		
NAME STREET ADDRESS	GEORGE, ROBERT B., JR.		1.1 TITLE 1.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS		
STREET ADDRESS	GEORGE, ROBERT B., JR.		1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFICERS		
	GEORGE, ROBERT B., JR. 1018 APRIL LNE		1.1 TITLE 1.2 NAME 1.3 STREE		ADDITIONS/CHANGES TO OFFICERS		Addition
STREET ADDRESS CITY-ST-ZIP	GEORGE, ROBERT B., JR. 1018 APRIL LNE N. FT. MYERS FL STD GEORGE, ROBERT B., SR.	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE	GEORGE, ROBERT B., JR. 1018 APRIL LNE N. FT. MYERS FL STD GEORGE, ROBERT B., SR. 1245 SABAL DRIVE	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GEORGE, ROBERT B., JR. 1018 APRIL LNE N. FT. MYERS FL STD GEORGE, ROBERT B., SR. 1245 SABAL DRIVE	DELETE	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE	TADORESS	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
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4. 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, of on an attachment with all address, with all other like empowered.

**SIGNATURE** 

SIGNATURE AND TYPED OF PRINTED HARM OF SIGNAT

FROREST CHEORGE JR

2-8-99 Date 941-332-2446 Daytime Phone #