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

FILED PROFIT Mar 19 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3) 634703 RICHARD J. BUTZE ASSOCIATES, INC. Principal Place of Business Mailing Address 15521 QUEENSFERRY DR. SE 15521 QUEENSFERRY DR. SE FT. MYERS FL 33912 FT. MYERS FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/04/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 59-1937906 21 26 Suite Ant # ntc \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country Žip Country 8. This corporation owes or has paid the current year Intangible X Yes ☐ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BUTZE, RICHARD J 15521 QUEENSFERRY DR SE Street Address (P.O. Box Number is Not Acceptable) 82 FT. MYERS FL 33912 83 Zip Code 84 City 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 Signature, typed or prioted name of registered agent and tain it applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE 1.1 TITLE Change TITLE BUTZE, RICHARD J 1.2 NAME NAME 15521 QUEENSFERRY DR SE 1.3 STREET ADORESS STREET ADDRESS FT. MYERS FL. 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE SD BUTZE, HELEN M 2.2 NAME NAME 15521 QUEENSFERRY DR SE 2.3 STREET ADDRESS STREET ADDRESS FT. MYERS FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4 1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 52 NAME NAME **53 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 54 CITY-ST-ZIP Change Addition DELFTE 61 TITLE TITLE

62 NAME

63 STREET ADDRESS

RICHARO J. BUTZE

6.4 CITY - ST - ZIP

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-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 941-768-2972