SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

FORT CONTRACTING, INC.

FILED
Oct 15 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address			4 100110 01101 18111 01812 01110 11991 1911 1	JININ DADAN BADER BANKA DIBAH BIDIN ADDI	
6225 DEER RUN SW 6225 DEER RUN SW FORT MYERS FL 33908 FORT MYERS FL 33908						T. 110 00 10 F	
U\$		U\$			DO NOT WRITE IN 3. Date Incorporated or Qualified	THIS SPACE	
2 Principal F	Place of Business	2a, Mailing Address			08/18/1980 4. FEI Number		
21 26						Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.					59-2022838	Not Applicable	
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23 28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zip Coun		у	8. This corporation owes or has paid the current year intangible		
24	25	29	30		Personal Property Tax due June 30.		
	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
FOR	it, st é phen e.		8	1 Name			
	7 RIVER RIDGE BLVD.		B	Street Add	Street Address (P.O. Box Number is Not Acceptable)		
	IT MYERS FL 33905					111 5W	
			8:	3			
			84	1 City		DE Zu Codo	
			"		25 Myons IC	FL 1° 3390 8	
11. Pursuan	to the provisions of sections 607.	0502 and 607.1508, Florida Statute	s, the above	e-named corpo	ration submits this statement for the purpose	of changing its registered	
office or agent. I	regist ered agent, or both, in the S am fa milia r with, a <u>nd access the</u> o	tate of Florida. Such change was i bligations of, section 607,0505, Fli	authorized b prida Statute	y the corporati is.	on's board of directors. I hereby accept the a	ppointment as registered	
SIGNATURE	XHE	PROS			100	13-98	
	Signature of the district of the state of th	agent and title if applicable. (No	OTE: Registered	Agent signature req			
12.	,	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12	
TITLE	PD	LI DELETE	1.1 TITLE			Change Addition	
NAME	FORT, STEPHEN E.		1.2 NAME				
STREET ADDRESS	6225 DEER RUN SW			TADDRESS			
CITY-ST-ZIP	FORT MYERS FL		1.4 CITY-S	T-ZiP			
TITLE			2.1 TITLE		· · ·	L_ Change Addition	
NAME	FORT, GLORIA D.		2.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	FORT MYERS FL		2.4 CITY-S	T-ZIP			
TITLE	FORT OTERUCKE IN	L DELETE	3.1 TITLE			Change Addition	
NAME STREET ADORESS	FORT, STEPHEN E., JR.		3.2 NAME				
STREET ADDRESS	2107 RIVER RIDGE BLVD FT MYERS FL			T ADDRESS			
CITY-ST-ZIP TITLE	FI MIENS PL		3.4 CITY-S	T-ZIP			
NAME		DELETE	4.1 TITLE			Change Addition	
			4.2 NAME				
STREET ADDRESS	•			TADDRESS			
CITY-ST-ZIP TITLE			4.4 CITY-S	T-ZIP			
		L DELETE	5.1 TITLE			Change Addition	
NAME STOREST ADDRESS			5.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP		<u> </u>	5.4 CITY-S	T-ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	6 1 TITLE		annooce	Change Addition	
NAME			6.2 NAME		300002665 -10/16/3801009	TOPE DE	
STREET ADDRESS			6.3 STREE	Į.	***550.00	10.00	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP	ate as a selection of the limited	10.15	

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.