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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 690498

(1)

LOUIS S. ERICKSON, P.A.

SIGNATURE:

FILED
Jan 31 1997 8:00am
Secretary of State

Principal Place 2301 CR 951 SUITE B NAPLES FL 339		Mailing Address 2301 CR 951 STE B NAPLES FL 34116-6524 US			
				3. Date Incorporated or Qualified 06/16/1981	3a. Date of Last Report 03/21/1996
	face of Business	2a. Mailing Address	951	4. FEI Number	Applied For
21 オク 0 Suite Apt	1 CR 951	26 230 CR Suite, Apt. #, etc.	101	59-2124487	Not Applicable
22 SUIT		27 SUITE F		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	1	City & State	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip _	Country	Zip	Country ,	8. This corporation has liability for it	
24 341	14 25 Collier	29 34/14	30 COLLER		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	stered Agent
	CKSON, LOUIS S		81 Name F	RICKSON, LOUIS:	S.
	CR 951			ress (P.O. Box Number is Not Acceptab	le)
SUIT	EB F		2 20	<u>st C.K. 951</u>	· · · · · · · · · · · · · · · · · · ·
NAPI	LES FL 33999 34/116		$ S_{i} $	ite F	
			84 City	Joples	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the p	urpose of changing its registered
office or r	registered agent, or both, in the State am familiar with, and accept the abliga	of Florida. Such change was a	uthorized by the corpora	tion's board of directors. I hereby accep	t the appointment as registered
-		7	Total Ottalolog.	1.	- 9,91
SIGNATURE	Signal of typed-or purific name of registered ager	reger title if applicable (NOTE	: Registered Agent signature requ	lred when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	······································
THIE	PST	☐ DELETE	1.1 TITLE		Change Addition
NAME	ERICKSON, LOUIS S.		1.2 NAME		
STREET ADDRESS	2301 C. R. 951, SUITE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MAPLES FL	DELETE	1.4 CITY - ST - ZIP		☐ Change ☐ Addition
HILE	LIST LAVIS	5.	2.1 TITLE		C distribe C vocabili
NAME Stockt Apportee	ERICKS on Louis	F	2.2 NAME 2.3 STREET ADDRESS		•
STREET ADDRESS CITY-ST-ZIP	Signale FL 341	lv .	2. 4 CITY - ST - ZIP	·	
TITLE	100 410	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	•	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7-P			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY - S1 - ZIF			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
			6.2 NAME		C vonigo C radiitott
	I .		D'E HAMIL		
NAME			6.3 STREET ADDRESS		
			6.3 STREET ADORESS 6.4 CITY - ST - ZIP		