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

PROFIT CORPORATION ANNUAL REPORT 1002



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

| FILED |
|--------------------|
| Feb 03 1998 8:00am |
| Secretary of State |

| | 1000 | | | | | |
|--|---|---|------------------------------------|----------------------------------|--|---|
| DOCUMENT # F61148 (5) R. G. MEYERS LEASING, INC. | | | | | | |
| | | | | | | |
| | | | | | # 1 30 (# 30 16)\$ #6(8) 40 0 (6)\$(6 (8) 16(6 4 (8)) | DIA BURIA BURIA BURIA BURIA MARA |
| Principal Plac | ce of Business | Mailing Address | | 7 | | |
| 12155 METRO PKWY 12155 METRO PKWY | | | | | | |
| 5 | | | | * | | |
| FT. MYERS FL 33912 US | | FT. MYERS FL 33912 Us | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified | |
| | | 03 | | | 01/06/1982 | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | Applied For |
| Sulte, Apt. | Suite, Apt. #, etc. | | | 59-2153714 | Not Applicable | |
| 22 | 27 Suite, Apr. #, etc. | Apr. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| City & State City & S | | | ate | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | Added to Fees |
| Zip 24 | Country | Zip | Country | y | 8. This corporation owes or has paid the o | |
| 541 | 9. Name and Address of Cui | 29 rrent Registered Agent | 30 | | Personal Property Tax due June 30. 10. Name and Address of New Registere. | Yes No |
| ME | YERS RONALD G. | | 81 | Name | | |
| 505 KINZIE ISL CT. | | | | Street Add | dress (P.O. Box Number is Not Acceptable) | |
| SANIBEL ISLAND FL 33957 | | | | | | |
| | | | 83 | | | |
| | | | 84 | City | F | 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607.0 | 0502 and 607.1508, Florida Stat | tules, the abov | e-named cor | poration submits this statement for the purpose | of changing its registered |
| office or r agent. I a | registered agent, or both, if the St im familiar with, and accept the of | ale of Florida. Such change wa ligations of, Section 607.0505. | s authorized by Florida Statule | y the corpora s. | poration submits this statement for the purpose ation's board of directors. I hereby accept the ap | ppointment as registered |
| SIGNATURE | | Clisers | | | 1-28- | -98 |
| 12. | Signature, typed or printed harne of registered | agont and little if applicable (N AND DIRECTORS | OTE: Registered Age | ent signature requ | ired when reinstaling) DATE | ID DIRECTORS III 40 |
| TITLE | PD | DELETE | 1.1 TITLE | | ADDITIONS/CHANGES TO OFFICERS AN | Change Addition |
| NAME | MEYERS, R. G. | | 1.2 NAME | | | |
| STREET ADDRESS | 12155 METRO PARKWAY, | SUITE 5 | : 1.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | FT. MYERS FL | Dritte | 1.4 CITY- S | ST - ZIP | 11-Pare ment | |
| TITLE NAME | | ☐ DELETE | 2.1 TITLE | 0 | CHARLESTER JA | Change Addition |
| STREET ADDRESS | | | 2.2 NAME 2.3 STREET | ADDRESS 5 | DE VINZYE 181 CT | _ |
| CITY-ST-ZIP | <u> </u> | | 2. 4 CITY - 1 | | ANIBA FL 33957 | / |
| TITLE | | DELETE | 3.1 TITLE | | V-PRESIDEN | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | Ł | EVIN. D. MEYELS | |
| STREET ADDRESS | | | 3 3 STREET | 77 | OF KINSE ASL | , , |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CITY - S 4.1 TITLE | ST-ZIP | 1449/ L 7799/ | Change Addition |
| NAME | | | 4.1 MLE | | ALL D. MENIEDS-SIM | Change L Addition |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS ADDRESS | OF KINCLE HE CT | · • • • • • • • • • • • • • • • • • • • |
| CITY-ST-ZIP | | | 4.4 CITY - S | 12 | AMBEL 73957 | ノー |
| TITLE | | ☐ DELETE | 5.1 TITLE | A | GIT! TRUNKUREAL | Change Addition |
| NAME | | | 5.2 NAME | P | DOYN KINEYET OF | |
| STREET ADDRESS | | | 5.3 STREET | 154 | OS KINZIC TILL S | |
| CITY-ST-ZIP TITLE | | DELETE | 5.4 CiTY-S 6.1 TITLE | T-ZIP | HILLIN THIS | Change Addition |
| NAME | | - berit | 6.2 NAME | | | LI Change LI Addition |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY - S | | | |
| 44 I horobico | artifuthat the information aventical | with this files does not a self. | day the sure | | 010 440 07(0)(1) Fig. (1) O() (1) | 114 14 14 14 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 truster employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in additional control of the corporation or the receiver or truster employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, Florida Statutes.