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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

FILED

Jan 31 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F85510

(8)

MARTIN E. DOLENCE, JR., P.A.

Mailing Address Principal Place of Business 1531 SAUTERN DRIVE SW 1531 SAUTERN DRIVE SW FT MYERS FL 33919-2732 FT MYERS FL 33919 3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1982 04/26/1996 2. Principal Piace of Business 4. FEI Number 2a. Mailing Address Applied For 59-2192266 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 30 Florida Statutes 24 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOLENCE, MARTIN E JR 1531 SAUTERN DRIVE SW 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS, FL 83 33919 84 City Zip Code 85 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 printing name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change THEF DOLENCE, MARTIN E JR NAME 1.2 NAME 1531 SAUTERN DR SW STREET ADDRESS 1.3 STREET ADDRESS FT MYERS, FL 00000 1.4 CITY-ST-ZIP CITY - S1 - ZIP DELETE Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TILLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - S1 - ZIP DELETE Change Addition THUE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change .... Addition THILE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZiP CITY-ST-ZIP DELETE Change Addition 61 TID F THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

SIGNATURE: Martin & Dobnice & Martin E Polence Jr. President 1/26/17 941-489-2607

14. I do 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

6.4 CITY - ST - ZIP

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