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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90029 031 \*\*\*150.00

	MENT # <b>F91791</b> LIO, INC.					
Principal Place	e of Business	Mailing Address				
13499 U S 41 S E UNIT 183 BELL TOWER FT MYERS FL 33907-3837		13499 U S 41 S E UNIT 183 BELL TOWER FT MYERS FL 33907-3837		DO NOT WRITE IN THIS SPACE		
I MICHOIC S	N301-0001			3. Date Incorporated or Qualifed		
				07/23/1982		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Арр	lied For
1		26		59-2213063	<del></del>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ad	
22		27		o, conticolo di cialco pocinto	Fee Req	
City & State	е	City & State		6. Election Campaign Financing	\$5.00 N	
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int		
24	25		0	Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	04	10. Name and Address of New Registered	Agent	
			81 Name			
	, MICHAEL C		82 Street A	ddress (P.O. Box Number is Not Acceptable)		
	9 U S 41 S E	•				
	183 BELL TOWER		83			
FT M	IYERS FL 33908		84 City		85 Zip C	ode
	•			FŁ	<b>.</b>     ``	
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut	nonzea by the corpor	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appoi	mument as reg	Istered
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: R	tegistered Agent signature rec			
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN		tegistered Agent signature rec	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN		RS IN 12
	OFFICERS AN				ND DIRECTOR	RS IN 12
12.	OFFICERS AN	D DIRECTORS	13.			
12. TITLE NAME	OFFICERS AN STD LIMING, VAN	D DIRECTORS	13. 1.1 TITLE			
12. TITLE NAME STREET ADDRESS	OFFICERS AN STD LIMING, VAN 8720 CHATHAM	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL	D DIRECTORS	13. 1.1 TITLE 1.2 NAME			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD	D DIRECTORS	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE	D DIRECTORS	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM	D DIRECTORS	13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD	D DIRECTORS	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY- ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY- ST-ZIP  3.1 TITLE		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD KIRK, MICHAEL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY- ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD KIRK, MICHAEL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4, CITY-ST-ZIP		☐ Change ☐ Change	Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AN STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET MYERS FL VD	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE		☐ Change ☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET MYERS FL VD KIRK, CHERYL M.	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME		☐ Change ☐ Change	Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4. CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS		☐ Change ☐ Change	Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET MYERS FL VD KIRK, CHERYL M.	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE		☐ Change ☐ Change	Addition  Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP		☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM ET_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL ET_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Change ☐ Change	Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL FT MYERS FL VD KIRK, CHERYL M 6612 PLANTATION PINES BL FT MYERS FL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP		☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT_MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL FT_MYERS FL VD KIRK, CHERYL M. 6612 PLANTATION PINES BL FT_MYERS FL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.1 TITLE		☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	STD LIMING, VAN 8720 CHATHAM FT MYERS FL VD LIMING, VONNIE 8720 CHATHAM FT MYERS FL PD KIRK, MICHAEL 6612 PLANTATION PINES BL FT MYERS FL VD KIRK, CHERYL M 6612 PLANTATION PINES BL FT MYERS FL	D DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY- ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.1 TITLE  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.5 STREET ADDRESS  6.4 CITY-ST-ZIP		☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that it are a 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 with all other like empowered.