Applied For Not Applicable

FILED Mar 04, 1999 8:00 am

Secretary of State

03-04-1999 90090 044 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300005297

1. Corporation Name

SIGNATURE

G.S. OF FORT MYERS, INC.

| Principal Place | Principal Place of Business Mailing Address | | | | | | | | | | |
|---|---|---|---------------------|----|--------|--|-------------------------------|--|-----------------------------|-------------|--|
| 1300 METROPOLITAN OKLAHOMA CITY OK 73108 | | 1300 METROPOLITAN OKLAHOMA CITY OK 73108 | | | | DO NOT WRITE IN T | IIS SPACE | Ē | | | |
| İ | | | | | | | 3. [| Date Incorporated or Qualifed | | | |
| | | | | | | | | 1/19/1993 | | | |
| 2. Principal Pla | 2. Principal Place of Business | | 2a. Mailing Address | | | | 4. F | El Number | | Applied For | |
| 21 | <u> </u> | | 26 | | | | _7 | 73-1431163 | | Not Applica | |
| | Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | Certificate of Status Desired | | 75 Additiona se Required | | |
| | City & State | | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 May Be Added to Fees | | | |
| Zip 24 | Country 25 | 29 | Zip | 30 | ountry | | ١. | This corporation owes the current year Personal Property Tax. | Intangible Yes | □No | |
| | 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | | | |
| 11011 | | | | | 81 | Name | | | | | |
| NICHOLS, JIM 35426 US 19 NORTH | | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| # 175 PALM HARBOR FL 34684 | | | | 83 | | | | | | | |
| I AURITANDOTTI E CTOOT | | | | 84 | City | | F | L 85 | Zip Code | | |

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, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent sig | signature required when (einstating) UATE | |
|----------------|--|-----------------------------|--|------------|
| 12. | OFFICERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN | |
| TITLE | CP DELE | TE 1.1 TITLE | Change A | ddition |
| NAME | COUNTS, JACK E JR | 1.2 NAME | | ļ |
| STREET ADDRESS | 1300 METROPOLITAN | 1.3 STREET ADI | ADDRESS | |
| CITY-ST-ZIP | OKLAHOMA CITY OK | 1.4 CITY-ST-ZIF | | |
| TITLE | CFO DELE | ETE 2.1 TITLE | ☐ Change ☐ A | ddition |
| NAME | HARDAWAY, KYP | 22 NAME | | |
| STREET ADDRESS | 1300 METROPOLITAN | 2.3 STREET ADI | | |
| CITY-ST-ZIP | OKLA CITY OK 73108 | 2, 4 CITY-ST-ZI | | |
| TITLE | VP DELE | STE 3,1 TITLE | Change A | Addition |
| NAME | CHILTON, MICHELLE G | 3,2 NAME | | |
| STREET ADDRESS | 1300 METROPOLITAN | 3 3 STREET AD | ADDRESS | |
| CITY-ST-ZIP | OKLAHOMA CITY OK 73108 | 3.4. CITY-ST-ZI | | |
| TITLE | | TE 41 TITLE | ☐ Change ☐ A | Addition |
| NAME | | 4, 2 NAME | | |
| STREET ADDRESS | | 4,3 STREET AD | ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY- ST- ZII | | |
| TITLE | DELE | 5,1 TITLE | ☐ Change ☐ A | Addition (|
| NAME | | 5.2 NAME | | |
| STREET ADDRESS | | 5,3 STREET AD | ADDRESS . | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZII | | |
| TITLE | DELE | ETE 6.1 TITLE | ☐ Change ☐ A | Addition) |
| NAME | | 6.2 NAME | | |
| STREET ADDRESS | | 6.3 STREET AD | ADDRESS | ĺ |
| CiTY-ST-ZiP | | 6.4 CITY-ST-ZU | - ZIP | |

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, with all other like empowered.