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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F95000003371 (0) **DOCUMENT #** THE NATIONAL PERDIEM COMPANY Principal Place of Business Mailing Address 201 NORTH WALNUT 3 CHRISTIAN CENTER 201 NORTH WALNUT 3 CHRISTIAN CENTER WILMINGTON DE 19801 WILMINGTON DE 19601 3. Date Incorporated or Qualified 3a. Date of Last Report 07/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 APPLIED FOR 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z\eta p$ Country This corporation has liability for intangible tax under s 199.032. 24 25 29 30 Florida Statutes 🔼 Yes 🗌 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BERTRAND, DEAN M 82 Street Address (P.O. Box Number is Not Acceptable) 1417-3 DEL PRADO BLVD., STE 473 CAPE CORAL FL 33990 83 84 City 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed hame of registered agent and title it applicable. (NOTE: Registered Agent signature required which rehistating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE **PCDS** DELETE 1. 1 TITLE Change BERTRAND, DEAM M DETAN M. BERTRAND 1.2 NAME 1417-3 DEL PRADO BLVD., STE 473 STREET ADDRESS 1417-3 DEL PRADO BLUD SUITEAZ 13 STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP 1.4 CITY - S1 - ZIP CAPE COCPL, FL 33990 TITLE DELF1E 2. 1 TITLE BEVERLY A.L. BERTRAND NAME 2.2 NAME STREET ADDRESS 1417-3 DEL PRADOBLVD. SUITE 478 2.3 STREET ADDRESS CITY-\$1-712 CORAL FL 33990 24 CITY-ST-7IP TITLE DELETE 3 1 THILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY-\$1-7IP DELETE 4. 1 111LE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-ZIF 44 CITY-ST-ZIP TITLE DELETE 5 17016 Change ☐ Addition NAME 5.2 NAME STREET ADDRESS

6.4 C(1Y - \$1 - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify 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 at

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CRY-ST-ZiP

6 1 TITLE

6.2 NAME

SIGNATURE:

CITY - S1 - ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

DELETE

PEAN M. BERTAINNO 4/29/96 941-656-0253

Change

Addition

12/95)