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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F97000006460 (6) DOCUMENT # 1. Corporation Name D.R. LOESER & CO.

FILED Mar 31 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address					
PO BOX 603 PO BOX 603							
TOHIK ME US	303	YORK ME 03909		D	O NOT WRITE IN THIS	S SPACE	
				3. Date Incorporated 12/09/1997	or Qualified		
21 321	PUTTER POINT DE	2a. Mailing Address 26	5				oplied For ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Statu	us Desired	\$8.75 A Fee Re	
City & State 23 NAPLES FL		City & State		Election Campaign Trust Fund Contrib	· -	\$5.00 Added t	
Zip		Zip	Country	8. This corporation o	wes or has paid the c	urrent year Inte	angible
24 3910	g, Name and Address of Current	29 Registered Agent	<u> 30 </u>	Personal Property 10, Name and Addre			No
LΟ	ESER, DAVID R	negistored Agent	81 Name	10, Ivamo ano Addre	/ New Registerer	a Agoilt	
321 PUTTER POINT DRIVE				Address (P.O. Box Number is	Not Acceptable)		
NA	PLES FL 34103		321	tudios (.C. Box Humber is	Perer An	حـــــــــــــــــــــــــــــــــــــ	
			83				
			84 City	(ADIEC	F	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statut	es, the above-named	corporation submits this state			s registered
office or re agent. I a	egistered agent, or both, in the State on familiar with, and accept the obligation ${f x}$	of Florida. Such change was a tions of, Section 607.0505, Flo	authorized by the corp orida Statutes.	oration's board of directors. I	hereby accept the ap	pointment as	registered
SIGNATURE		No.	E Rogistered Agent signature		DATE		
12.	Signature, typed or printed name of registered agen OFFICERS AND		E Registered Agent signature		GES TO OFFICERS AN	ND DIRECTOR	IS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	LOESER, DAVID R		1.2 NAME				
STREET ADDRESS	321 PUTTER POINT DRIVE NAPLES FL		1.3 STREET ADDRESS				
CITY-ST-ZIP	VST	Clourt	1.4 CITY-ST-ZIP	1.0			T Address
TITLE	LOESER, JAMES D	DELETE	2.1 TITLE	17	ies b.	Change	Addition
NAME	27 WEST SHORE ROAD		2.2 NAME	LOESEL, JAM 27 WEST SHOW	es s.		
STREET ADDRESS	MERRIMAC MA		2.3 STREET ADDRESS	MERNIUM, NA	a es.		
CITY-ST-ZIP TITLE		DELETE	2 4 CITY - ST - ZIP 3.1 TITLE	3	<u> </u>	Change	Addition
NAME			3.2 NAME	LOESER JANE	ブ .		
STREET ADDRESS				321 putton Pa	our Dn.		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	NAPLES. FL			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			☐ Change	Addition Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP			Chance	Addition.
TITLE		₩ DETELE	6.1 TITLE			Change	Addition
NAME CTOTET ADDOCCO			6.2 NAME				
STREET ADDRESS			6 3 STREET ADDRESS				
CITY-ST-ZIP	certify that the information supplied wit	h this filing does not qualify to	6.4 CITY-ST-ZIP	d in Section 119 07(3)(i) Flor	ida Statutes I further	certify that the	information
indicated officer or i	on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or on an attack	annual report is true and acciver or trustee empowered to	curate and that my sign	nature shall have the same le	gal effect as if made t	under oath; tha	atlam an