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FILED

Feb 14 1997 8:00am  
Secretary of StatePROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G34465 (6)

1. Corporation Name  
WM. A. INSKEEP & CO.Principal Place of Business  
12697 NEW BRITTANY BLVD.  
FT MYERS FL 33907Mailing Address  
12697 NEW BRITTANY BLVD.  
FT MYERS FL 33907-36313. Date Incorporated or Qualified  
03/29/19833a. Date of Last Report  
01/30/19964. FEI Number  
59-2280683Applied For  
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

INSKEEP, WILLIAM A.  
13610 BRYNWOOD LANE, SE  
FT. MYERS FL 33912

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE  
NAME INSKEEP, WILLIAM A  
STREET ADDRESS 13610 BRYNWOOD LANE, SE  
CITY-ST-ZIP FT MYERS FL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE S ☐ DELETE  
NAME INSKEEP, JENNIFER E.  
STREET ADDRESS 13610 BRYNWOOD LANE, SE  
CITY-ST-ZIP FT. MYERS FL2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE VP ☐ DELETE  
NAME JOHNSON, A. K  
STREET ADDRESS 15771 WINDWARD WAY CIR., #4201  
CITY-ST-ZIP FT MYERS FL3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME VP  
4.3 STREET ADDRESS WHITEHEAD, ROBERT J.  
4.4 CITY-ST-ZIP 4171 SAWGRASS POINT DRIVE, #204  
BONITA SPRINGS, FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97

Date

Daytime Phone #

0000717

CR2E034 (9/96)