

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G37173 (3)**
1. Corporation Name

FLORIDA RIVERS DEVELOPMENT CORPORATION

Principal Place of Business

2121 MCGREGOR BOULEVARD
FT MYERS FL 33901

Mailing Address

2121 MCGREGOR BOULEVARD
FT MYERS FL 33901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1983

4. FEI Number

58-1536549

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 167 Frenchman Ct.

Suite, Apt. #, etc.

2a. Mailing Address

26 2095 N. Jefferson

Suite, Apt. #, etc.

City & State

23 Ft. Myers, FL

Zip Country

24 33912

City & State

28 Midland, MI

Zip Country

29 48642

Country

9. Name and Address of Current Registered Agent

KIESEL, THOMAS F.
2121 MCGREGOR BLVD
FT MYERS FL 33902

10. Name and Address of New Registered Agent

81 Name

John N. Bartos

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

167 Frenchman Ct.

83

84 City

Ft. Myers

FL

85 Zip Code

33912

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 *John N. Bartos*

JOHN N. BARTOS, Sec/Treas. 7/21/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME TAYLOR, DONALD R
STREET ADDRESS 1700 ARDMORE
CITY-ST-ZIP MIDLAND MI

TITLE ☐ DELETE

NAME BARTOS, SANDRA L
STREET ADDRESS 2095 N JEFFERSON
CITY-ST-ZIP MIDLAND MI 48642

TITLE ☐ DELETE

NAME BARTOS, JOHN N
STREET ADDRESS 2095 N JEFFERSON
CITY-ST-ZIP MIDLAND MI 48642

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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.

SIGNATURE *John N. Bartos*

7/21/98 1-517-835-5980

CR2E034 (5/98)