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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G66425

(1)

VINEYARD BOOK STORE, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					s reditive date grund arter and bistal arter did.	LIA BIBIT DEBIT MINIT BIBIE INDL
4295 TAMIAMI TRAIL NAPLES FL 34103 US		% robert m. Buckel 4501 tamiami trail North, Ste. 400 Naples Fl 33940		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
9 Principal C	Place of Business	2a. Mailing Address			10/26/1983 4. FEI Number	T 14-55-4 C
21 21	Tage of Business	<u></u>				Applied For Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.			59-2335106	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Zip Country		Trust Fund Contribution	Added to Fees
24	25	├			 This corporation owes or has paid the c Personal Property Tax due June 30. 	urrent year intangible ☐ Yes ☐ No
24	9. Name and Address of Curre		30		10. Name and Address of New Registered	
DI I	CKEL, ROBERT M.		81	Name		
	OTEC, ROBERT M. DI TAMIAMI TRAIL N.		82	Ct-s at A ala	toos (D.O. Day Niyahay is Not Assessable)	····
STE. 400					ress (P.O. Box Number is Not Acceptable)	
NA	PLES FL		83			
			84	City	F	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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.		ID DIRECTORS	13.	jeni signature redo	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE			Change Addition
NAME	BUNDY, LEON M.		1.2 NAME	1		
STREET ADDRESS	6624 TRAIL BLVD.		1.3 STREE	T ADDRESS		13
CITY-ST-ZIP	NAPLES FL		1.4 CiTY-	ST-ZIP		
TITLE	Ō	DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	BUNDY, JO ANN S.		2.2 NAME)
STREET ADDRESS	6624 TRAIL BLVD.		2 3 STAEE	T ADDRESS		
CITY-\$T-ZIP	NAPLES FL		2. 4 CITY-	ST-ZIP		
TITLE		☐ DELET E	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZiP		
TITLE			4.1 TITLE		,	L Change L Addition
NAME			4. 2 NAME	ł		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 THILE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY -	S1 - ZIP		
TITLE		DELETE	6.1 TITLE	ĺ		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP			6.4 CITY -	ST-ZIP	Contact 440 07/01/0 Florida Cast de 1 6 mb	

Thereby 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 attactiment with an address.

Rundy

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