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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H19856

(4)

FILED Mar 19 1998 8:00am Secretary of State

ZACHM	AN & ASSOCIATES, INC.	• •						
Principal Place	e of Business	Mailing Address				3 1001011 0185 (1060 10104 10101 01510 0111 01611 0		11011 010H (80)
7370 COLLEGE PKWY FT MYERS FL X13010X US		7370 COLLEGE PKWY FT MYERS FL 突突 X US				DO NOT WRITE IN TH	IIS SPACE	
						3. Date Incorporeted or Qualified 09/06/1984		
Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Applied For
21	area of traditions	26				59-2447219	h	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.						5 Additional
22		27				5. Certificate of Status Desired		Required
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Cour	ntry		a. This corporation owes or has paid the		
24 33907-		29 33907-5569	30			Personal Property Tax due June 30.	Yes	□Ño
	g. Name and Address of Current	Registered Agent				10. Name and Address of New Register	ed Agent	
ZAC	CHMAN, ROLAND			81 1	Name			l
	31 SUNSET HARBOR LANE		1	82 3	Street Addres	ss (P.O. Box Number is Not Acceptable)		
	[141 Myers 33919		Ì	83				
			ŀ	84 (City	······································	85 Z	ip Code
A. Pursuool	to the pre-visions of Scaling 607 OLO	and CO7 1609 Clarida Statut	oc the ob		amad carpa	ration submits this statement for the purpos		a its topistored
 office or r 	egistered agent, or both, in the State i m familiar with, and accept the obliga	of Florida. Such chango was :	authorized	l by th	ne corporatio	n's board of directors. I hereby accept the	appointment	as registered
1	т тапшаг with, авс ассерт ие орлда	tions of, Section 607,0505, Fi	orida Stati	utes.				
SIGNATURE	Segnature, typical or printed name of regelered age-	rand the dapphiable (NO)	t Registered	Apen)	signature required	When reinstating) DAT	E	
12.	OFFICERS AND	and the second s	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP	☐ DELFTE	1.1 30	LF			☐ Chang	ge 🔲 Addition
NAME	ZACHMAN, ROLAND		1.2 NA	ME				
STREET ADDRESS	9431 SUNSET HARBOR LANE	, APT. 141	1.3 ST	REET AD	DRESS			1
CITY-ST-ZIP	FT MYERS FL			Y-S1-2	ZIP			
TITLE		☐ DELETE	21717		1		L Chang	ge 🔲 Addition
NAME			2.2 NA					l
STREET ADDRESS				REET AD				l
CITY ST ZIP		DELETE		TY-ST-	ZIP		Chang	ne Addition
NAME		LT perese	3.1 TIT 3.2 NA		1		C CHARG	b Montion
STREET ADDRESS				ME REET AD	PDOLCG			
1				TY-ST-	1 1			
CITY+ST-ZIP TITLE		DELETE	3.4. U	$\overline{}$	£IF'		Chang	ge Addition
NAME			4. 2 NA		1		O	,
STREET ADDRESS				REET AD	ORESS			ļ
CITY-ST-ZIP				Y-ST-2				
TITLE		☐ DELETE	5.1 TIT				Chang	ge Addition
NAME		-	5.2 NA		1		- •	
STREET ADDRESS				REET AD	DRESS			
CITY-\$1-ZIP				Y-ST-2				
TITLE		DELETE	6 1 TIT			·	Chang	ge Addition
NAME			6 2 NA	ME	Ì			ļ
STREET ADDRESS			63 STI	REET AD	DAESS			
CITY-ST-ZIP	_		64 CIT	Y-ST-2	ZIP		_	
	certify that the information supplied wi	h this filing does not qualify f				ection 119.07(3)(i), Florida Statutes. I furthe	r 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.

RS ZACHMAN