FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

H33072 DOCUMENT #

(0)

1.	Corporation Name				
	MANDHEL	INC			

	net, inc.						
			Address Wales Loop Ta springs fl 33923				
					3. Date Incorporated or Qualified 12/07/1984	3a. Date of Last Report 03/21/1995	
2. Principal F	2. Principal Place of Business 2a. Mailing Address 26				4. FEI Number Applied For 59-2606835 Not Applicable		
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	⊢ n ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip Country 29 30			8. This corporation has liability for in Florida Statutes Yes		
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered Agent	
_			81	Name (7	UNDT MERTON		
	(, VIRGINIA .C.		82	Street Address	se (P.O. Box Number is Not Acceptable	(e)	
	WALES LOOP		الما	10	10710 WALKS LOOP		
BONITA SPGS. FL 33923					BONITO SPRINGS, FL		
			84	City	DUITOSPRINGS, 1	les Zin Codo	
		<u></u>		•		FL ** ヺ゚゚ヺ゚ヺ゚゚゚゚゚゚゚゚゚ヹ゚゚゚ゔ゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚゚	
11. Pursuant or registe familiar w	to the provisions of Sections 607.050 ered agent, or both in the State of Flor ith, and accept the boligations of Sec	02 and 607.1508, Florida Statut rida Such change was authoriz stion 507.0505, Florida Statutes	es, the above-n zed by the corpo s.	amed corporat oration's board	tion submits this statement for the purp of directors. I hereby accept the appo	pose of changing its registered office ontment as registered agent. I am	
SIGNATURE.	///estan	1 int	 ,		24	125/96	
	Signature typed a printed name of registered age		DTE Registered Agent	signature required v	<u> </u>		
12.	OFFICERS AI	ND DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFI		
TITLE	HEELEY, WILLIAM	☐ DELETE	1. 1 TITLE			Criange Addition	
NAME	JOIST-WALES LOOP		1.2 NAME	/	OERNER GEORG	2	
STREET ADDRESS	BONITA SPGS FL		1.3 STREET		SGI WALES 2001	ر مرور مرور مرور مرور مرور مرور مرور مر	
CITY - ST - ZIP	VD VD		14 CITY- ST			33923	
TIFLE	RUSCH, AL	□ OELETE	2 1 TITLE		DUNE METAN	Change Addition	
NAME	10151 WALES LOOP		22 NAME		OUNDT, MERTON 0200 WALES LOO	P	
STREET ADDRESS	BONITA SPGS FL		23 STREET		0200 0012	22222	
CHY-ST-ZIP	STD		24 CITY-SI		<u> </u>	33923	
THILF	ELBERT, DOROTHY	☐ DELETE	3. 1 TITLE	- 5	D	Change Addition	
NAME	10151 WALES LOOP		3.2 NAME		0751 WALES LOOP	P	
STREET ADDRESS	BONITA SPGS FL		3.3 STREET		OB TOUTELS TOUS	33923	
CITY-ST-ZIP TITLE		□ DELETE	4. 1 THTLE		- n		
NAME	•	L occur	4. 1 MILE 4.2 NAME	-	D RAVERSO ANN 0430 WALES LO BONITO SPRINGS, FL	Z . Changs La Addition	
STHEET ADDRESS			4.3 STREET	annocce /	AUZO WALES LO	019	
				TIO 7	2 STA SOUNCE FO	33923	
CITY - ST - ZIP TITLE		DELETE	4.4 CITY - ST 5 1 TITLE	· zir	DUALLO OF NINOS , 1 C	Change Addition	
NAME		LJ seeds	5.2 NAME			C. C. LOGILON	
STREET ADDRESS			5.3 STREET	ADORESS			
CITY-ST-ZIP			5.4 CITY - S1	•			
TITLE		DELETE	6 1 TITLE	611		Change Addition	
NAME		_	6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-7IP			6.4 CITY-ST				
	by certify that the information supplied	with this filing is voluntarily furn			the exemption stated in Section 119.0	77/3)/k) Florida Statutes I further	

certify that the information indicates or this same legal effect as it 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: Ann J. Inaver Roas, 9-14-96 941-495-1745
SIGNATURE and Typed on Printed Mame of Signing Officer on Director 9-14-96 941-495-1745
Date Descriptions