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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998

DOCUMENT # H36834 (0)

MANAGEMENT INVESTMENTS GROUP, INC.

**FILED** 

Apr 30 1998 8:00am

Secretary of State

| 114 (141)   | EMENT INVESTIGETIO GI   | 1001   1110                              |  |  |                                     |
|---|---|--|--|--|-------------------------------------|
| Principal Place   | of Business   | Mailing Address                          |  |  | ISBUS MURIT MINIS MEDIT MEDIT TENDI |
| C/O DENNIS GOEDECKE   |   | C/O DENNIS GOEDECKE                      |  |  |                                     |
| 15248 US 41 S #900-10 15248 US 41 S #900-1  |   | 15248 US 41 S #900-10                    |  | DO NOT WRITE IN THE SOLOT  |                                     |
| FT MYERS FL 33908 FT MYERS FL 33908   |   | FT MYERS FE 33908                        |  | DO NOT WRITE IN TH  3. Date Incorporated or Qualified  | 15 SPACE                            |
|   |   |  |  | 01/02/1985   |                                     |
| 2. Principal Pla  | ace of Business   | 2a. Mailing Address                      | <del></del>                                    | 4. FEI Number  | Applied For                         |
| 21 54/0   | PARK RD.  | 26 5410 PARK                             | $R_{\mathcal{D}_{I}}$                          | 59-2493213   | Not Applicable                      |
| Suite, Apt. #   | # etc.  | Suite, Apt. #, etc.                      |  |  | \$8.75 Additional                   |
| 22 # 2  |   | 27 # 2                                   |  | 5. Certificate of Status Desired   | Fee Required                        |
| City & State  | m, t  | City & State                             |  | 6. Election Campaign Financing   | \$5.00 May Be                       |
| 23 FORT   | MYERS, FL   | 28 FORT MYER                             |  | Trust Fund Contribution  | Added to Fees                       |
| Zip<br>24 3390  | /Country  | Zip 33908 30                             | Country  | This corporation owes or has paid the<br>Personal Property Tax due June 30.                            | current year Intangible  Ses No     |
| 24 33 70  | 25 25 Name and Address of Curren                                    | _   _                                    | <u>ul -                                   </u> | 10. Name and Address of New Registere  |                                     |
| COPPECUE DESIRE   |   |  |  |  |                                     |
|   | 48 US 41 S, STE 900-10  |  | 1 1 40   | OEDECKE, DENNIS  |                                     |
|   | MYERS FL 33908  |  | 5477   | ddress (P.O. Box Number is Not Acceptable)   |                                     |
|   |   |  | 83   | 111200   |                                     |
|   |   |  | 84 City  |  | 85 Zip Code                         |
|   |   |  | Fo   | er Myers F   | L   85   Zip Code   33908           |
| 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, typied or printed name of registered age<br>OFFICERS AND |  | tegistered Agent signature re                  | quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A  |                                     |
| 12.   | DPS OF FICE HS AND  | DELETE                                   | 13.  | ADDITIONS/CHANGES TO OFFICERS A  | Change Addition                     |
| NAME  | GOEDECKE, DENNIS  |  | 1.2 NAME                                       |  |                                     |
| STREET ADDRESS  | 5410 PARK ROAD #2   | ļ  | 1.3 STREET ADDRESS                             |  |                                     |
| CITY-ST-ZIP   | FT MYERS FL   |  | 1.4 CITY - ST - ZIP                            |  |                                     |
| TITLE   |   | ☐ DELETE                                 | 2.1 TITLE                                      |  | ☐ Change ☐ Addition                 |
| NAME  |   | ļ  | 2.2 NAME                                       |  |                                     |
| STREET ADDRESS  |   |  | 2.3 STREET ADDRESS                             |  |                                     |
| CITY-ST-ZIP   |   |  | 2. 4 CITY-ST-ZIP                               |  |                                     |
| TITLE   |   | DELETE                                   | 3.1 THTLE                                      |  | Change Addition                     |
| NAME  |   |  | 3.2 NAME                                       |  |                                     |
| STREET ADDRESS  |   |  | 3.3 STREET ADDRESS                             |  |                                     |
| CITY-ST-ZIP   |   | DESERTE                                  | 3 4. CITY-ST-ZIP                               |  | Change   Addition                   |
| TITLE   |   | ∐ DELETE                                 | 4.1 TITLE                                      | •  | Change Addition                     |
| NAME<br>OTDOOR ADDOORS  |   |  | 4. 2 NAME                                      |  | 1                                   |
| STREET ADDRESS  |   |  | 4.3 STREET ADDRESS                             |  |                                     |
| CITY-ST-ZIP   |   | DELETE                                   | 4.4 CITY-ST-ZIP<br>5.1 TITLE                   |  | Change Addition                     |
| NAME  |   | marginal and the last of the             | 5.2 NAME                                       |  |                                     |
| STREET ADDRESS  |   |  | 5.3 STREET ADDRESS                             |  |                                     |
| CITY-ST-ZIP   |   | İ  | 5.4 CITY-ST-ZIP                                |  |                                     |
| TITLE   |   | DELETE                                   | 6.1 TITLE                                      |  | Change Addition                     |
| NAME  |   |  | 6.2 NAME                                       |  |                                     |
| STREET ADDRESS  |   | ł  | 63 STREET ADDRESS                              |  |                                     |
| CITY-ST-ZIP   | <u> </u>  |  | 6.4 CITY - ST - ZIP                            |  |                                     |
| 14. I hereby ce   | ertify that the information supplied w                              | ith this filing does not qualify for the | he exemption stated                            | in Section 119.07(3)(i), Florida Statutes. I further ature shall have the same legal effect as if made | certify that the information        |
| officer or d  |   | siver or trustee empowered to exe        |  | equired by Chapter 607, Florida Statutes; and the  |                                     |