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 # H39831 (3)

MARK FETZER, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business				ing Address			1 100 (011 1110 (1110) (1110 (1110 (1110 (1110) (110) (110)) (1110) (1110) (1110) (1110) (1110) (1110) (1110) (1110) (110			
2310 N. OLD DIXIE HWY.			P.C	P.O. BOX 4362						
FT PIERCE FL 34946				FT PIERCE FL 34948			50 1107 14/017	E IN 25 110 00 A O.F.		
U\$			US	US				E IN THIS SPACE		
							 Date Incorporated or Qualified 01/28/1985 			
2. Principal Place of Business			2a. 1	2a. Mailing Address			4, FEI Number	Applied For		
21 1890 Cobia Drive Sulte, Apt. #, etc.			26	26 1890 Cobia Drive			59-2495274	Not Applicable		
				Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
22			27				C. Communic of Charles Downer	Fee Required		
City & State			(City & State			6. Election Campaign Financing	\$5.00 May Be		
vero Beach, FL			28				Trust Fund Contribution	Added to Fees		
Zip	060	Country	⊢	Zip	\vdash	untry	8. This corporation owes or has p			
24 329		25 USA	29	32960	30	USA	Personal Property Tax due Jun			
Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent Name Name										
FE	TZER, MAR	K				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
2310 N. OLD DIXIE HWY.				82 Street Ac			Mark Fetzer et Address (P.O. Box Number is Not Accepta	ble)		
FT PIERCE FL 34946							1890-Cobia Drive			
						83				
						84 City		85 Zip Code		
							Vero Beach	FL 32960		
11. Pursuant	to the provis	ions of Sections 6	07.0502 and 607	7.1508, Florida Sta	lutes, the	above-name	d corporation submits this statement for the	purpose of changing its registered		
agent. I a	egisteren ag m fam iliar wi	th, and accept the	obligations of,	Section 607.05 0 5,	Florida St	atutes.	orporation's board of directors. I hereby acco	the appointment as registered		
SIGNATURE										
12.	Signature typed		RS AND DIRECT		13		ADDITIONS/CHANGES TO OFFI			
TITLE	PDI	OTTIOE	IS AND DIFECT	, DELETE		IITLE	ABBITIONS/OFF/AIRCES TO OFF	Change Addition		
NAME	FETZER	MARK			1	NAME		- · -		
STREET ADDRESS		OBIA DRIVE				street addres:	,	1		
		EACH FL					'			
CITY-ST-ZIP TITLE	VDS			☐ DELE TE		CITY-ST-ZIP TITLE		Change Addition		
	FETZER	DIANE				NAME				
NAME,	1	OBIA DRIVE				naivie Street addres:				
STREET ADDRESS		EACH FL					·			
CITY-ST-ZIP	12,100			☐ DELETE		CITY-ST-ZIP TITLE		Change Addition		
TITLE				bettie				Command Transmont		
NAME						NAME				
STREET ADDRESS						STREET ADDRESS	?			
CITY-ST-ZIP				DELETE	_	CITY-ST-ZIP		Change Addition		
TITLE					1	TIFLE		Change Roullon		
NAME					1	NAME				
STREET ADDRESS						STREET ADDRESS	5			
CITY-ST-ZIP				printe		DITY-SF-ZIP		Change Addition		
TITLE				☐ DELETE		TITLE		☐ Change ☐ Addition		
NAME					1	NAME				
STREET ADDRESS					53	STREET ADDRESS	5	į		
CITY-ST-ZIP						CITY-ST-ZIP				
TITLE				☐ DELETE	61	INLE		Change C Addition		
NAME					62	NAME				
STREET ADDRESS					63	STREET ADDRESS	S			
CITY+ST-ZIP					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 of the receiver or trustee empoyered 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 prinan attachment with an address.