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FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H62812 (3)

1. Corporation Name

MYERS KRAUSE & STEVENS, CHARTERED

Principal Place of Business

Mailing Address

5811 PELICAN BAY BLVD., #600
NAPLES FL 33963

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NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/19/1985

4. FEI Number

59-2538915

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRAUSE, ANDREW J.
5811 PELICAN BAY BLVD., #600
S-600
NAPLES FL 33963

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed in permanent ink, of registered agent and the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE

NAME MYERS, WILLIAM H.
STREET ADDRESS 4801 ISLAND POND CT #1202
CITY-ST-ZIP BONITA SPRINGS FL

TITLE VSD ☐ DELETE

NAME KRAUSE, ANDREW J.
STREET ADDRESS 210 SILVERADO DR
CITY-ST-ZIP NAPLES FL

TITLE VD ☐ DELETE

NAME STEVENS, WILLIAM
STREET ADDRESS 5930 VIA LUGANO #101
CITY-ST-ZIP NAPLES FL

TITLE VD ☐ DELETE

NAME FRANKLIN, RICHARD S
STREET ADDRESS 10886 LONGSHORE WAY W
CITY-ST-ZIP NAPLES FL

TITLE VD ☐ DELETE

NAME BROWNE, DAVID P
STREET ADDRESS 28931 WINTHROP CIR SW
CITY-ST-ZIP BONITA SPRINGS FL

TITLE VD ☐ DELETE

NAME STOMMEL, ROBERT J
STREET ADDRESS 793 WILLOW BROOK DR #101
CITY-ST-ZIP NAPLES FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

592 Whispering Pine Lane
Naples, FL 34103

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 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

[Signature]

[Signature]

CR2E034 (10/97)