## 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 #

TITLE

STREET ADDRESS

CITY-ST-ZIP

H95531

(0)

LAKEVIEW INDUSTRIAL ASSOCIATES, INC.

Principal Place of Business		Mailing Address			8 TÁDDÍAIT BILD INTRE NUSAS MILHA STINAS SUNT NINST
P O DRAWER 1465		P O DRAWER 1465			
CAPE CORAL FL 33910		CAPE CORAL FL 33910			DO NOT WRITE IN THIS SPACE
:					3. Date Incorporated or Qualified
					01/20/1986
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For
21		26			<b>59-2694660</b> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country			
24	25		30	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
241	g. Name and Address of Curre		301		10. Name and Address of New Registered Agent
FIS	HER, LEIGH M.		61	Name	
1505 40 ST			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
SUITE B				1	durings (1.0. box realised is not nosoptable)
CAPE CORAL FL 33904			83		
			84	City	85 Zip Code
			1	- ",	<b>FL</b>   ~
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					
40	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE: ID DIRECTORS	Registered Ag	ent signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	ST OFFICERS AIN	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	FISHER, LEIGH M.		1.2 NAME		
STREET ADDRESS	4002 DEL PRADO BLVD			T ADDRESS	
CITY-ST-ZIP	A A		1.4 CITY-		
TITLE	D				Change Addition
NAME	<u> </u>		2.2 NAME		
STREET ADDRESS			2.3 STREE	T ADDRESS	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	
TITLE			3.1 TITLE		Change Addition
NAME	PERON, EUGENE		3.2 NAME		
STREET ADDRESS	1728 SE 43RD ST		3.3 STREE	T ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	D protect	3.4. CITY-	ST-ZIP	D Alfred
TITLE	PD	☐ DELE <b>te</b>	4.1 TITLE		☐ Change ☐ Addition
NAME	SUTPHEN, RICHARD		4. 2 NAME		
STREET ADDRESS	923 S.E. 13TH AVE.			T ADDRESS	
CITY-ST-ZiP	CORAL CORAL FL	☐ DELE <b>TE</b>	4.4 CITY- 5.1 TITLE	SI-ZIP	Change Addition
TITLE		C) percie			Change Audition
NAME OZDECZ ADDREGO			5.2 NAME	T 4000000	
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			5.4 CITY-	51-4IP	

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.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

DELETE

CR2E03

Change

**FILED** 

Mar 13 1998 8:00am

Secretary of State