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

J31500 **DOCUMENT #**

(8)

1. Corporation Name

NOKOMIS	DEVELOPMENT	COMPANY
	DETECTION INCIDEN	CONTRACT

NOKO	MIS DEVELOPMENT COM	PANY				######################################
Principal Place of Business Mailing Address DIETER GEBHARD 1858 RINGLING BLVD. SARASOTA FL 34236 Mailing Address DIETER GEBHARD 1858 RINGLING BLVD. SARASOTA FL 34236).			
				 Date Incorporated or Qualified 08/28/1986 		of Last Report 106/1995
21	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0005180		Applied For Not Applicable
Suite, Apt. # 22 City & State		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required
Zip	Country	City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
24	25 9. Name and Address of Curre	Zip 29 01 Registered Agent	Country 30	This corporation has liability for Florida Statutes Name and Address of New	es 🔲 No	
1858 RIA	RD, DIETER NGLING BLVD DTA FL 34236		 81 Name 82 Street Add 83 84 City 	ress (P.O. Box Number is Not Accept		85 Zip Code
SIGNATURE	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, typed or protect name of registered agen			ration submits this statement for the p ird of directors. I hereby accept the ap	FL purpose of chang pointment as re	ling its registered offic gistered agent. I am
12.	OFFICERS AN	O DIRECTORS	E Registered Agent signature require 13.	d when reinstating) ADDITIONS/CHANGES TO OF	DATE EIGERS AND DI	DECTODO IN 40
TITLE	PD DIETER	DELETE	1. 1 TITLE	ADDITIONO/OFFANGES TO OF		Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	GEBHARD, DIETER 1858 RINGLING BLVD SARASOTA FL		1.2 NAME 1.3 STREET ADDRESS			-
TITLE NAME		☐ DECETE	1.4 CHY-ST-ZIP 2 1 TITLE 22 NAME			Change
STREET ADDRESS CITY-ST-ZIP			2 3 STREET ADDRESS			
NAME STREET ADDRESS		DELETE	3.1 TITLE 3.2 NAME 3.3. STREET ADDRESS			Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.4 C/TY - ST - Z/P 4.1 THLE 4.2 NAME			Change Addition
CITY-SI-ZIP TITLE NAME		DETELE	4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAME			hange Addition
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		П	hange [Addition
NAME STREET ADDRESS CITY-ST-ZIP			6.2 NAME 6.3 STREET ADDRESS 6.4 CHY-ST-ZIP			,

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if dianged, or than attachment with an address.

SIGNATURE:

signature and typed as printed name of signing offices on director H. Dieter Gebhard

941 365-4617