

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

FILED

May 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #J36412

1. Corporation Name

NANWIN CORPORATION

Principal Place of Business

Mailing Address

505 N. Del Prado Blvd., 505 N. Del Prado Blvd.
Cape Coral, FL 33909 Cape Coral, FL 33909

3. Date Incorporated or Qualified

3a. Date of Last Report

October 6, 1986

2. Principal Place of Business

2a. Mailing Address

21 5205 Sunset Court

26 5205 Sunset Court

4. FEI Number

59-2784235

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHN P. MILLIGAN
1500 Colonial Blvd., #103
Fort Myers, FL 33907

81 Name

Thomas E. Shipp, Jr.

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

4223 Del Prado Boulevard

83

84 City

Cape Coral

FL

85 Zip Code
33904

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, 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



THOMAS E. SHIPP, JR.

April 30, 1997

Signature typed or printed name of registered agent (delete if not applicable)

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

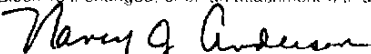
TITLE	VP, T	☐ DELETE
NAME	Nancy Anderson	
STREET ADDRESS	5205 Sunset Court	
CITY-ST-ZIP	Cape Coral, Fl. 33904	
TITLE	D, S	☐ DELETE
NAME	Winston Anderson	
STREET ADDRESS	5205 Sunset Court	
CITY-ST-ZIP	Cape Coral, Fl. 33904	
TITLE		☐ DELETE
NAME		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☒ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***165.00

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97

(941) 772-4279

Date

Daytime Phone #

CR2E034 (9/96)