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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE.

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J42324

(0)

NEPTUNE I, (CORTEZ, FLORIDA) INC.

FILED							
May 05	1997 8:00am						
Secreta	ary of State						

Principal Plac	e of Business	Mailing Address				Ê alde k dib il bibih bibic P	4(81)
PO BOX 276 4600 46TH AVE CORTEZ FL 342	<u>:</u>	PO BOX 276 4800 46TH AVE CORTEZ FL 34215-0276					
					3. Date Incorporated or Qualified 11/17/1986	3a. Date of La 05/01/199	
2. Principal P	Place of Business	2a. Mailing Address 26			4. FEI Number 59-2819952		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	7	75 Additional se Required
City & State	е	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for		
24	25		30		,	Yes No	
	9. Name and Address of Curren	t Registered Agent	24 1		10. Name and Address of New R	egistered Agent	
	IULTZ, MARY FRANCES		81 Nami		ell Douglas	1	
	I 9TH AVE W.		82 Street	ot Addross	on On Davidstumbar is the	· • •	
BKA	DENTON FL 34205		83	· R	708 50% A	re w	
			84 City	<u></u>	radenton	FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.050:	2 and 607 1508. Florida Statuter	the above-pame				ing its registered
office or r	to the provisions of Sections 607.0503 registered agent, or both, in the State	Florida Such change was au	thorized by the co	orporation	n's board of directors. I hereby accor	pt the appointmen	nt as registered
_	am familiar with, and accept the obliga	mans of, Section out Joseph Fiori	ioa statutes:		Du El	n 5 27	1957
SIGNATURE	Serveture imped or printed name of registers a service	n; and tile if applicable (NOTE:	Higislered for fit signatu	ture re-fored	when reinstating)	DATE	11/
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO 6-FI	CERS AND DIREC	TORS IN 12
TITLE	P	☐ DELETE	1.1 THLE			Cha	nge Addition
NAME	BELL, WALTER T.		12 NAME				
STREET ADDRESS	12115 45 AVE W		1.3 STREET ADDRESS	s			
CITY-ST-ZIP	CORTEZ FL	T course	14 City-St-ZiP				
TITLE	DELL CALLERY	☐ D€LETE	21 THLE	1		☐ Cha	inge Addition
NAMÉ	BELL, CALVIN E		2 2 NAME				
STREET ADDRESS	12115 45 AVE W CORTEZ FL		2 3 STREET ADDRESS	s			
CITY-ST-ZIP	ST	DELETE	2 4 CITY - ST - ZIP			☐ Cha	inge Addition
TITLE	BELL, CARL D	f" P OFFE IF	3 1 TITLE			L 010	пре 🗀 мистион ј
NAME STREET ADDRESS	8708 50 AVE W		3.2 NAME 3.3 STREET ADDRESS	<u> </u>	·		ŀ
CITY-ST-ZIP	BRADENTON FL		3.3 STREET ADDRESS	5			,
TITLE	JINOCH TOTAL	DELETE	4.1 TITLE			☐ Chai	inge [] Addition
NAME			4 2 NAME			_	
STREET ADDRESS	Į.		4.3 STREET ADDRESS	s			
CITY-ST-ZIP			4.4 CITY - ST - ZIP	<u> </u>			
TITLE		☐ DELETE	51 TITLE	1		☐ Cha	inge Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	s			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE	7		☐ Cha	inge Addition
NAME	}		6.2 NAME	-		•	
STREET ADDRESS			6.3 STREET ADDRESS	s			
CITY-ST-ZIP			6.4 CITY - \$1 - ZIP				
14. I do nere: Informatic	by certify that the information supplied on Indicated on this annual report or s	I with this filing does not quality applemental annual report is tru	for the exemption ie and accurate ar	ı stated in nd ihat m	n Section 119.07(3)(i), Florida Statut nv signature shall have the same leg	es. I further certify ial effect as if mad-	that the e under oath; that
l am an o appears i	on indicated on this annual report or sofficer or director of the corporation or in Block 12 or Block 13 if changed for	the receiver or truster empower on an attachment with an addr	red to execute this	report a	is required by Chapter 607, Florida	Statutes; and that	my name