

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J47038

1. Corporation Name

COLDIRON MANAGEMENT INC.

Principal Place of Business

7181 COLLEGE PARKWAY
SUITE 42
FT. MYERS FL 33907
US

Mailing Address

7181 COLLEGE PARKWAY
SUITE 42
FORT MYERS FL 33907
US

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90116 013 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1986

4. FEI Number

59-2745933

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

VAIL, RODD
7171 COLLEGE PKWY
SUITE 42
FORT MYERS FL 33907

10. Name and Address of New Registered Agent

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

Rodd Vail

(NOTE: Registered Agent signature required when reinstating)

3/17/99

DATE

12. OFFICERS AND DIRECTORS

TITLE DS ☐ DELETE
NAME COLDIRON, NANCY
STREET ADDRESS 2875 PALM BCH BLVD, 506
CITY-ST-ZIP FT MYERS FL

TITLE DP ☐ DELETE
NAME COLDIRON, JAMES
STREET ADDRESS 2875 PALM BCH BLVD, 506
CITY-ST-ZIP FT MYERS FL

TITLE VD ☐ DELETE
NAME RODD, VAIL
STREET ADDRESS 3670 SUNLAND LN
CITY-ST-ZIP ESTERO FL

TITLE TD ☐ DELETE
NAME VAIL, TODD
STREET ADDRESS 1627-10 RED CEDAR DR
CITY-ST-ZIP FT MYERS FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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, with all other like empowered.

SIGNATURE:

Rodd Vail

3/17/99

Date

(941) 277-1171

Daytime Phone #

CR2E034 (1/98)