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

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90014 013 ***150.00

DOCUMENT	#	151	803
DOCOMENT	π	JOI	0 U3

1. Corporation Name

R.W. BELL, INC.

_	 ,									
		Mailing Address P.O. BOX 4402 VERO BEACH FL 32964	P.O. BOX 4402							
						DO NOT W 3. Date Ir corporated or Qualife		S SPACE		1
						01/08/1987	·			
2. Principa P	lace of Business	2a. Mailing Address				4. FEI Number		Apr	plied For	
21		26				59-2790600			t Applicable	
Suite, A st.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Re		
22 Cib. 8 Cip.		City & State				6. Flactice Committee Cinencia		\$5.00		4
City & State	8	28				6. Election Campaign Financin _Trust Fund Contribution	g 🗀	Added to		
23 . Zip	Cour try	Zip	Cour	ntry		8. This corporation owes the co	rrent year	ntangible		1
24	25	29	30			Persor al Property Tax.			I⊒No	
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of Nev	Registere	I Agent		┥
DICI I	KL, RONALD W			81	Name					ļ
	WINDSONG WAY			82	Street Add	ress (P.O. Box Number is Not Acce	otable)]
	D BEACH FL 32963			83						1
. ,,,,,				_						1
				84	City		FI	85 Zip C	Code	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	⊨of Florida. Such change was a	authorized	l by ti	named corporati	poration submits this statement for the on's board of directors. I hereby according to the original statement for the original st	ne purpose o cept the app	of changing its pintment as rec	egistered sistered	
SIGNATURE							DATE			ĺ _
42	Signature, typed or printed name of registered age	n and title if applicable (NOT) NO DIRECTORS	E: Registered	Agent	signature require	ADDITIONS/CHANGES TO		ND DIRECTO	RS IN 12	11/08
TITLE	P	DELETE	1.1 TIT	LE				Change	☐ Addition	1 5
NAME	BELL, RONALD W		1.2 NA	ME						5
STREET ADDR ESS	910 WINDSONG WAY		1.3 ST	REET	ADDRESS					FD3A
CITY-ST-ZIP	VERO BEACH FL 32963		1.4 CIT	<u> Y-</u> ST-	ZIP] £
TITLE		☐ DELETE	2.1 TIT	TLE				Change	☐ Addition	
NAME			2.2 NA	ME						
STREET ADDRESS			2 3 ST	REET	ADDRESS					}
CITY-ST-ZIP		El ocuera	2.4 CI		- ZiP			Change	Addition	4
TITLE		☐ DELETE	3.1 TIT					[_] Criange	☐ Acciden	
NAME			32 NA		ADDRESS					
STREET ADDRESS			1							
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TiT	TY-ST	-219			Change	☐ Addition	1
NAME			4. 2 N							1
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			1	TY-ST-	i i					
TITLE		☐ DELETE	5 1 TIT					Change	Addition	
NAME			5.2 NA	ME						
STREET ADDITIESS			5.3 ST	REET	ADDRESS					1
CITY-ST-ZIP			5.4 CIT		ZIP					1
TITLE		☐ DELETE	6.1 TJ7		1			Change	☐ Addition	
NAME			6.2 NA							
STREET ADDITESS					ADDRESS .					
CITY-ST-ZIP			6.4 CI	TY-ST-	-ZIP					J

14. There by 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 of the

SIGNATURE:

SNA TURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/24

561.231.1539