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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

GAIL AND WALTER, INC.

FILED Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					 [e fi oldil bibli d	AN BIBN BIB	
1381 13TH AVE N. 1381 13TH AVE N. NAPLES FL 35942. NAPLES FL 35942								
					DO NOT WRIT	E IN THIS SE	ACE	
,					02/09/1988			
Principal Place of Business 2a. Mailing Address				·	4. FEI Number			oplied For
21	26			65-0031254			ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	
22 27					5. Certificate of Status Desired	<u> </u>	Fee Re	equired
City & Stat	e	City & State	¬ ´		6. Election Campaign Financing	П	\$5.00	
			Zip 34102 Country		Trust Fund Contribution	aid the curre	Added t	
24 34	25 Country 29 Zip 34		30		8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New R			
DE	Loach, Guion T.		81	1 Name				
2335 N. TAMIAMI TRAIL			82	2 Street Addr	ess (P.O. Box Number is Not Accepta	ble)		
SUITE 310 NAPLES FL 33940			83	3				
l NA	FLEO FL 00040		L	ļ				
			84	7		FL	85 Zip 0	İ
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								
	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: R AND DIRECTORS		gent signature requir		DATÉ		
12.	D OFFICERS	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFI	CERS AND D	DIRECTOR:	S IN 12
NAME	WOOD, WALTER		1.2 NAME			_	Change	
STREET ADDRESS	1381 13TH AVE N.			T ADDRESS				
CITY-ST-ZIP	NAPLES FL		1.4 CITY-	1				
TITLE	D	☐ DELETE	2.1 TITLE	<u> </u>			Change	Addition (
NAME	WOOD, GAIL		2.2 NAME					
STREET ADDRESS	1381 13TH AVE N.	:	2.3 STREE	T ADDRESS				İ
CITY-ST-ZIP	NAPLES FL		2. 4 CITY-	-ST-ZIP		¥3		
TITLE		DELETE 3.1 T					Change	Addition
NAME			3.2 NAME					
STREET ADDRESS				TADDRESS				
City-ST-ZiP		DELETE	3.4. CITY- 4.1 TITLE	\$T-ZIP			T Channe	I I desire
NAME		- Detere	4.1 IIILE 4.2 NAME			Ŀ	_ Change	Addition
STREET ADDRESS				T ADDRESS				ļ
CiTY-ST-ZiP			4.4 CITY-					
TITLE		DELETE	5,1 TITLE	31-21			Change	Addition
NAME		_	5.2 NAME			-		
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-5					
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	T ADDRESS				
CITY-ST-ZIP			6.4 CITY-5					
14. I hereby c	ertify that the information supplied	with this filing does not quality for the	e exemp	tion stated in S	Section 119.07(3)(i), Florida Statutes. I	further certif	y that the i	information

plemental 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 rithe receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

941-774-4898