ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

Principal Place of Business
7232 MANATEE AVE. W.
BRADENTON FL 34209

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90020 050 ***550.00

APRIL INV	ESTMENTS OF BRAD	ENTON, INC.							
ncipal Place of Business Mailing Address							ilēli sibii eieli sibii aibii iabi		
32 MANATEE AVE. W. ADENTON FL 34209		7232 MANATEE AVE. W. Bradenton FL 34209				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 04/05/1989				
Principal Place of Business		2a. Mailing Address				4. FEI Number	Applied For		
·	•	26				65-0116150	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1	5. Certificate of Status Desired	\$8.75 AdditionalEee_Required		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip	Country 25	Zip	Cou 30	ntry	•	This corporation owes the current year Intangible Personal Property.	Yes No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent		
	ers, clifford L.			81	Name				
802 11	TH STREET WEST		82 Street Add			ess (P.O. Box Number is Not Acceptable)			
BRADENTON FL 34205			83						
				84	City	FL	85 Zip Code		
Pursuant to	the provisions of sections 607.	0502 and 607.1508, Florida Sta	tutes, the ab	0ve-	named corporation	ation submits this statement for the purpose of ch	anging its registered		

office or registered agent, or both, in the State of Florida. Such change was authorized by tagent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

IGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE:	Registered Agent signatur	re required when reinstating)		DATE	
	OFFICERS AND DIRECTORS		13.	ADDITIONS/	CHANGES TO OFFIC	ERS AND DIRECTO	DRS IN 12
TLE	P	DELETE	1.1 TITLE			Change	Addition
ME	MEYER, SUE A.	_	1.2 NAME	Barbara	Lodwick	-	
REET ADDRESS	7516-4TH AVE W		1.3 STREET ADDRESS	1805 911+5	ST.NW U, FLA		Í
TY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP	GRADENTO	U, FLA -	<i>34209</i>	
ne		DELETE	2.1 TITLE		•	Change	Addition
₩ E			2.2 NAME				
REET ADDRESS			2.3 STREET ADDRESS				l
TY-ST-ZIP		·	2.4 CITY-ST-ZIP		<u> </u>	<u> </u>	
TLE		DELETE	3.1 TITLE			Change	Addition
₩E			3.2 NAME				
REETADDRESS			3.3 STREET ADDRESS				
TY-ST-ZIP			3.4 CITY-ST-ZIP				
rLE .		DELETE	4.1 TITLE			Change	Addition
ME			4.2 NAME				
REET ADDRESS			4.3 STREET ADDRESS				İ
TY-ST-ZIP			4.4 CITY-ST-ZIP				
'LE		DELETE	5.1 TITLE			Change	Addition
ME			5.2 NAME				
REET ADDRESS			5.3 STREET ADDRESS				
TY-ST-ZIP			5.4 CITY-ST-ZIP				
LE		DELETE	6.1 TITLE	•		Change	Addition
WE			6.2 NAME				
REET ADDRESS			6.3 STREET ADDRESS				
ry-st-zip			6.4 CITY-ST-ZIP	7112-72-24-2-1			

1. 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 chapaed, or on an attachment with an address.

SIGNATURE:

941-192-0481