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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K96881

(3)

ALAN WITTENAUER, INC.

FILED Apr 14 1998 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address			T SOURDEST DID IDIED DISES SOURS URSUI INDS DI	fil alah alah elah biri	I UPDIL IDE!
1063 PINE ISI NAPLES FL 3		1063 PINE ISLE LANE NAPLES FL 33962-3181			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					06/20/1989		
	lace of Business	2a. Mailing Address	17.	01	4. FEI Number	Ар	plied For
21 46/	3 Long Key C	ti 26 46/3 LOI	ng KE	y Ct	65-0128624	No	t Applicable
Suite, Apt.		Suite, Apt. #, etc.	/	<i>'</i> 	5. Certificate of Status Desired	\$8.75 A	
City & State	ples, FC	28 Maples	28 Maples, FL		Election Campaign Financing Trust Fund Contribution	on Added to Fees	
- 2PS // /	Country	5,,,,	Country		8. This corporation owes or has paid t		
24 391	9, Name and Address of Curr		00]		Personal Property Tax due June 30.		No
PAAJ		sur undistant Whalle	81	Name 🔥	10. Name and Address of New Regist	TUBBY ORD	
WITTENAUER, ALAN 1063 PINE ISLANE LANE NAPLES FL				<i>H</i> _	AN WITERAUS SS (P.O. Box Number is Not Acceptable)	C+.	
			83	,			
			84	Circ.	•	- laal z	31
			64	City /	ades	FL 85 388	27/15
l Oπice of fi	edistered boent, or both, in the Sta	502 and 607.1508, Florida Statutes ite of Florida. Such change was au igations of, Section 607.0505, Flori	thorized by t	namad carpa	ration submits this statement for the purp n's board of directors. I hereby accept the	ose of changing its le appointment as	s registered registered
SIGNATURE					, ,		
12.	Signature, typed or printed name of registered a OFFICERS A	ND DIRECTORS	13.	signature required	ADDITIONS/CHANGES TO OFFICER	C AND DIDECTOR	C 131 10
TITLE	PM	DELETE	1.1 TITLE	Т	ADDITIONS/CHANGES TO OFFICER	Change	Addition
NAME	WITTENAUER, ALAN		1.2 NAME			and onlings	
STREET ADDRESS	1063 PINE ISLE LANE		1.3 STREET AL	TUBERS 211	US LOVAKEUCH		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-	7IP 7	613 Long Key Cti	15	
TITLE	TSD	DELETE	2.1 TITLE		apies, PC STI	Change	Addition
HAME	HOMIAK, KAREN J.		2.2 NAME	1			
STREET ADDRESS	1063 PINE ISLE LANE		2.3 STREET AD	nnerss 44	613 LONG KEY C	4.	
CITY-ST-ZIP	NAPLES FL		2. 4 CITY-ST-		ander El 3411	'n	
TITLE		DELETE	3.1 TITLE		upaco, 1 C 09/1	Change	Addition
NAME			3.2 NAME				
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TITLE		DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4.2 NAME				-
STREET ADDRESS			4.3 STREET AD	DRESS			
CITY-ST-ZIP			4.4 CITY-ST-				
TITLE		DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME			•	
STREET ADDRESS			5.3 STREET AD	IDRESS			
CITY-ST-ZIP			5.4 CITY-ST-	ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AD	DRESS			
CITY-ST-ZIP			6.4 CITY-ST-	ŀ			
	ertify that the information supplied	with this filing does not qualify for t			ection 119.07(3)(i), Florida Statutes, I furti	her 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.