

FILED
Jul 11, 2005 8:00 am
Secretary of State

DOCUMENT # L11622



Zip	Country	Zip	Country
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4. FEI Number 65-0150977	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SMITH, WILLIAM R P.A. 8191 COLLEGE PARKWAY SUITE 204 FT MEYERS, FL 33919		Name	
		Street Address (P.O. Box Number is No: Acceptable)	
		City	FL

SIGNATURE _____
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when certifying) DATE _____

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPS KNIGHT, STEEVEN 24280 S. TAMiami TR. BONITA SPRINGS, FL 34134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT KELLEY, MARTIN J 176 SOUTH COLLIER BLVD MARCO ISLAND, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT Michael R Hayes 24280 S Tamiami Trail Bonita Springs FL 34134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE:

Michael R. Hayes Michael R. Hayes 7/5/05 992-9096