Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90111 041 ***150.00

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

DOCUMENT # L41633

1. Corporation Name

CIVIL INVECTIONATION ACENICY INC

CIVIL IN	VESTIGATION AGENCY, IN	J •								
Principal Plac	e of Business	Mailing Address				1		HIII DADA U	1811 B1811 B1811 81	(811 8191: 1881
5010 80TH AVE CIR E 5010 80TH AVE CIR E										
SARASOTA FL 34243 SARASOTA FL 34243						DO NOT WRITE IN THIS SPACE				
	-					3.	Date Incorporated or Qualifed]
							01/10/1990			
2. Principa P	lace of Business	2a. Mailing Address					FEI Number			lied For
21		26				ļ	<u>65-0:1630:17</u>			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certifc ate of Status Desired		\$8.75 A	
22						+_	Fleeties Compaign Financiae			
23	e	28					Election Campaign Financing Trust Fund Contribution		\$5.00 to Added to	
Zip	Cour try	Zip	Country			+-	This corporation owes the current	t vear nt		
24	25	29	30				Persor al Property Tax.	•		[]No
	9. Name and Address of Curren	t Registered Agent		_		10.	Name and Address of New Reg	jistered	Agent	
O. In	DEDIAM ID O 1		81	1	Name					
	DERMAN, JR. C J.		82	! !	Street Ac dre	ss (P	O. Box Number is Not Acceptable			
5010 80TH AVE CIR E SARASOTA FL 34243			-							
SAN	NOUTA TE 34243		83	1						
			84	1	City			FL	85 Zip C	ode
office ∈r r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed na na of registered age	cf Fforida. Such change was autitions of, Section 607.0505, Ffori	thorized by da Statutes	thes.	e corporation	n's bo	ard of directors. I hereby accept to	he aproi	ntment as reg	g stered
12.		II) DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	ZERS.	D DIRECTO	FIS IN 12
TITLE	PTD	DELETE 1.1		1.1 TITLE					☐ Change	Addition
NAME	SUNDERMAN, CLAUDE J. JR 12N		1.2 NAME	1.2 NAME						
STREET ADDRESS	5010 80TH AVE CIR E		1.3 STREET ADDRESS		DORESS					
CITY-ST-ZIP				1.4 CITY-ST-ZIP						
TITLE	VSD	☐ DELETE	2.1 TITLE						☐ Change	☐ Addition
NAME	00110E11111111111111111111111111111111		2 2 NAME							
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP				2. 4 CITY-ST-ZIP 3.1 TITLE					Change	Addition
TITLE		_		3.1 ITTLE					onenga	
NAME			3.3 STREE	7 AD	ODESC					
STREET ADDRESS				34. CITY-ST-ZIP						
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	Q1-Z					Change	☐ Addition
NAME			4 2 NAME							
STREET ADDRESS			4.3 STREE		DDRESS					
CITY-ST-ZIP			4.4 CITY-5		IP					
TITLE		☐ DELETE	5.1 TITLE						Change	☐ Addition
NAME			5.2 NAME							
STREET ADDRESS										
			5.3 STREE							3
TITLE		☐ DELETE	5.3 STREET 5.4 CITY-S 6.1 TITLE						Change	Addition

14. 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 armual 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 changes, or on an appear ment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CLAUDE J. SUNDERMAN JA SIGNATI DE AND TYPED OR PRINTED NAME OF SIGNING OFFICE TOR DIRECTOR SIGNATURE:

STREET ADDRE 3S

CITY-ST-ZIP

941-359-3707