

FILED



Jul 21 1997 8:00am
Secretary of State

[illegible]

Mailing Address
11803 METRO PKWY.. #3
FT. MYERS FL 33912-1394

2. Principal Place of Business		2a. Mailing Address	
21	1062 S. YACHTSMAN	26	Same
	Suite, Apt. #, etc.		Suite, Apt. #, etc.
22	Sanibel FL.	27	
	City & State		City & State
23	33957	28	
	Zip		Zip
24	33957	29	
	Country		Country
25	Lee	30	

3. Date Incorporated or Qualified 03/20/1990		3a. Date of Last Report 09/23/1996	
4. FEI Number 65-0183374		Applied For	
		Not Applicable	
5. Certificate of Status Desired		☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution		☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
☒ Yes ☐ No			

BEANE, KAREN E.
6410-B ARC WAY
FT. MYERS FL 33912

81	Name	Beane, Karen E.	
82	Street Address (P.O. Box Number is Not Acceptable)	1062 S. YACHTSMAN	
83			
84	City	Sanibel	FL
85	Zip Code	33957	

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: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	BEANE, KAREN E.	
STREET ADDRESS	11803 METRO PKWY., #3	
CITY - ST - ZIP	FT. MYERS FL 33912	

1.1 TITLE	Pres.	☒ Change	☐ Addition
1.2 NAME	Karen E Beane		
1.3 STREET ADDRESS	1062 S. Yachtman		
1.4 CITY-ST-ZIP	Sanibel FL. 33957		

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

2.1 TITLE	☐ Change	☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

3.1 TITLE	☐ Change	☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

	☐ Change	☐ Addition
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 changed, or on an attachment with an address.

SIGNATURE

SECRET

7/1/95

CR2E034 (9/96)