FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L82264 (7)

1. Corporation Name

M & B HOLDINGS OF SOUTHWEST FLORIDA, INC.

Principal Place of Business	Mailing Address
2730 FOWLER ST. FT. MYERS FL 33901	2730 FOWLER ST. FT. MYERS FL 33901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/21/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 12370 Metro Parkway
Suite, Apt. #, etc. 22
City & State 23 Ft. Myers FL
Zip 24 33912-1313 Country 25 USA

2a. Mailing Address
26 12370 Metro Parkway
Suite, Apt. #, etc. 27
City & State 28 Ft. Myers, FL
Zip 29 33912-1313 Country 30

4. FEI Number: 65-0205463 ☐ 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 § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BYNUM, BRUCE A.
2730 FOWLER STREET
FT. MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	11 TITLE	☐ Change ☐ Addition
NAME	BYNUM, BRUCE, A	12 NAME	
STREET ADDRESS	1361 WAINWRIGHT WAY	13 STREET ADDRESS	
CITY ST ZIP	FT MYERS FL	14 CITY ST ZIP	
TITLE	VS	21 TITLE	☐ Change ☐ Addition
NAME	BYNUM, MARILYN, C	22 NAME	
STREET ADDRESS	1361 WAINWRIGHT WAY	23 STREET ADDRESS	
CITY ST ZIP	FT MYERS FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	FENBERT, KATHRYN ANN	32 NAME	
STREET ADDRESS	131 COVENTRY LANE	33 STREET ADDRESS	
CITY ST ZIP	DECATUR GA	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	LONGMIRE, GRETCHEN, SUE	42 NAME	
STREET ADDRESS	6 VINCA	43 STREET ADDRESS	
CITY ST ZIP	LITTLETON CO	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above or on an attachment with an address.

SIGNATURE: _____ 4-27-95 (813) 768-6144
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0318037 CP