SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name L84695

(0)

CLB CONSULTING, INC.

Pfin	cipai	Place	OI	DUSI	ness	
9919	SPO	ONBILL	. A	OAD	EAST	

Mailing Address

9919 SPOONBILL ROAD EAST

FILED Aug 17 1998 8:00am Secretary of State



BRADENTON FL 34209		BRADENTON FL 34209			
				DO NOT WRITE IN THIS SPACE	
]				3. Date Incorporated or Qualified	
				07/02/1990	
2. Principal Place of Business		2a. Mailing Address	<u></u>	4. FEI Number	Applied For
21		26 100/ FERO		65-0214828	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Çity & State		6. Election Campaign Financing	\$5.00 May Be
23		28 / Owe / (, N/I		Trust Fund Contribution	Added to Fees
Zip Country		Zip Country		8. This corporation owes or has paid the current year Intangible	
24	25	29 49331 B	OSA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registers	ed Ag ent
WEI	GLE, RAYMOND A., III		81 Name		
	SPOONBILL ROAD EAST		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	DENTON FL 34209		62 Street Add	dress (F.O. Box Number is Not Acceptable)	
	DENION I E 04255		83		
			84 City	F	85 Zip Code
11. Pursuani	t to the provisions of sections 607.050	2 and 607.1508, Florida Statutes	, the above-named corp	oration submits this statement for the purpose of	changing its registered
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au	thorized by the corporat	tion's board of directors. I hereby accept the app	pointment as registered
ì	arr ranninar wirr, and accept the obliga	ations of, section 007.0303, Flor	ida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOT	E: Registered Agent signature re-	quired when reinstating) DATE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	WALKER, ADRON H.		1.2 NAME		 ·····
STREET ADDRESS 802 11TH STREET W.			1.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP		
TITLE	CD	DELETE	2.1 TITLE		Change Addition
NAME	WEIGEL, RAYMOND A., II	Dettere	2.2 NAME		Change C Addition
***************************************			2.3 STREET ADDRESS		
			8		
CITY-ST-ZIP			2.4 CITY-ST-ZIP 3.1 TITLE	·	TT
1	PD	L_] DELETE	4		Change Addition
NAME	WEIGEL, RAYMOND A., III		3.2 NAME		
STREET ADDRESS	1001 FERO		3.3 STREET ADDRESS		
CITY-ST-ZIP	LOWELL MI		3.4 CITY-ST-ZIP		_
TITLE	STD	☐ DELETE	4.1 TITLE		Change Addition
NAME	WEIGEL, WAVELET		4.2 NAME		
STREET ADDRESS	9919 SPOONBILL ROAD EAST		4.3 STREET ADDRESS		,
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		<u></u> -
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	600002618	206 ρε
STREET ADDRESS			6.3 STREET ADDRESS	-08/17/9801137-	-048 / =

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 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.

6.4 CITY-ST-ZIP

616956-1215

*****550.00**