, FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Kathorine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90082 042 ***150.00

DOCUMENT # L87236

HOOTER	rs of coconut grove.	INC.								
	•				- 1	! (40 kb!! 60 % (11))	IN ALII EKILI SIT	III BARII BARII I	IFICA BIJIN 1956	
}					1					
Principal Plac	e of Business	Mailing Address				i smillimit san larki isala ivade ii	III MEN MEN MENUL MEN	NLI MENNIN MENNIN	I I BH BIRAT I BRI	
3015 GRAND A	AVE	4411 CLEVELAND	AVE.							
COCONUT GRO		FT. MYERS FL 33								
US		US				DO NOT WRIT	E IN THIS	SPACE		1
				•	3.	Date Incorporated or Qualifed				
<u> </u>		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			_	07/16/1990		- (,)		-
<u> </u>	Place of Business	2a. Mailing Addre	355		"	FEI Number			plied For	┨
21	#	26 Suite, Apt. #.				65-0213218			t Applicable	1
Sulfe, Apt.	, #, 8tC.	<u>├</u>	OIC.		5.	Certificate of Status Desired		\$8.75 A		{
City & Stal	to .	27 · City & State				Floriton Annual Florida	_	· · · · · · · · · ·		1
23	,	28			".	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		ļ
Zip	Country	Zip		Country		This corporation owes the curre	not smar leta			
24	25	29	30		"	Personal Property Tax.		∏aYes	□No	}
[44]	9. Name and Address of Curre		[30]	1	10.	Name and Address of New R				1
			·	81 Name						1
GAR	rgano, anthony j									1
2075	5 W FIRST ST			82 Street A	Address (F	P.O. Box Number is Not Accepta	DIE)			١
STE	203			83						1
FT. 1	MYERŞ FL 33901									Į
				84 City			FL	85 Zip (Code	
_		02 and 507 1500 Flatin	la Statutes It	he above named o	corporatio	n submits this statement for the	numose of c	hanging its	registered	
11. Pursuant	to the provisions of Sections 607.05	ישטוום אַעני, וישט מוום אַעני, רוטוו								1
office or r	registered agent, or both, in the State	e of Florida. Such chanc	ie was author	rized by the comp	pration's b	oard of directors. I hereby accep	t the appoin	tmant as re	gistered	
office or r agent. I s	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such chanc	ie was author	rized by the comp	oration's b	oard of directors. I hereby accep	t the appoin	tment as re	gistered	
office or r	registered agent, or both, in the State	e of Florida. Such chang pations of, Section 607.0	je was author 505, Florida :	rized by the comp	oration's b	oard of directors. I hereby accep	t the appoin	tment as re	gistered	6
office or r agent. I s	registered agent, or both, in the State am familiar with, and accept the oblig Signature, hoed or printed name of registered ag	e of Florida. Such chang pations of, Section 607.0 pert and title if applicable. IND DIRECTORS	e was author 505, Florida : (NOTE: Regis	rized by the corpo Statutes	oration's b	oard of directors. I hereby accep	oate	DIRECTO	RS IN 12	(00)
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, hoed or printed name of registered ag	e of Florida. Such changations of, Section 607.0 pations of, Section 607.0 pent and title if applicable.	P was author 505, Florida : (NOTE: Regis	rized by the corpo Statutes stared Agent signature re	oration's b	oard of directors. I hereby accep	oate	tment as re	gistered	(44,00)
office or ragent. I a SIGNATURE	registered agent, or both, in the State or familiar with, and accept the oblig Signature, hold or printed name of registered so OFFICERS A	e of Florida. Such chang pations of, Section 607.0 pert and title if applicable. IND DIRECTORS	(NOTE: Register)	rized by the corpo Statutes stared Agent signature re 13.	oration's b	oard of directors. I hereby acceptions:	CATE	DIRECTO	RS IN 12	24 /44/00)
office or r agent. I a SIGNATURE 12.	registered agent, or both, in the State on familiar with, and accept the oblig Signature, hoed or printed name of registered as OFFICERS A CEOD LAGESCHULTE, DAVID L.	e of Florida. Such chang pations of, Section 607.0 pert and title if applicable. IND DIRECTORS	(NOTE: Right	rized by the corpo Statutes. stand Agent signature re 13.	oration's b	oard of directors. I hereby accep	CATE	DIRECTO	RS IN 12	24 /44
office or I agent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, head or printed name of registered as OFFICERS A CEOD LAGESCHULTE, DAVID L.	e of Florida. Such chang pations of, Section 607.0 pent and site of applicable. IND DIRECTORS	(NOTE: Right	rized by the corpo Statutes. stand Agent signature re 13. 1.1 TITLE 1.2 NAME	oration's b	oard of directors. I hereby acceptions:	CATE FICERS AND	DIRECTO	R.S. IN 12	25024 /44
office or I agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS	registered agent, or both, in the State of familiar with, and accept the oblig Signature, hold or printed name of registered agency of the CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL.	e of Florida. Such chang pations of, Section 607.0 pert and title if applicable. IND DIRECTORS	(NOTE: Right	nized by the corpo Statutes staned Agent signature re 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	oration's b	oard of directors. I hereby acceptions:	CATE FICERS AND	DIRECTO	RS IN 12	25024 /44
office or I agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of Amillar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL	e of Florida. Such chang pations of, Section 607.0 pent and site of applicable. IND DIRECTORS	(NOTE RAPE	nized by the corpo Statutes. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	equired when the	oard of directors. I hereby acceptions and acceptions acception and acceptions and acception acceptance ac	DATE FICERS AND	DIRECTO	R.S. IN 12	25024 /44
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State of familiar with, and accept the oblig Signature, hold or printed name of registered agency of the CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL.	e of Florida. Such chang pations of, Section 607.0 pent and site of applicable. IND DIRECTORS	(NOTE: Republic	nized by the corpo Statutes. stand Agent signature of 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	equired when the	oard of directors. I hereby acceptions:	DATE FICERS AND	DIRECTO	R.S. IN 12	25024 /44
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State of familiar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD LYNCH, PAUL W.	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	e was author 505, Florida 3 (NOTE: Regin	nized by the corpo Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	equired when the	oard of directors. I hereby acceptions and acceptions acception and acceptions and acception acceptance ac	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition	CB2E034 (44,08)
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of familiar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD LYNCH, PAUL W. 5745 SANDPIPER PL	e of Florida. Such chang pations of, Section 607.0 pent and site of applicable. IND DIRECTORS	e was author 505, Florida 3 (NOTE: Repla LETE	nized by the corpo Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS	equired when the	oard of directors. I hereby acceptions and acceptions acception and acceptions and acception acceptance ac	CATE FICERS AND	DIRECTO	R.S. IN 12	2E034 /44
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZEP TITLE NAME STREET ADDRESS CITY- ST-ZEP CITY- ST-ZEP	registered agent, or both, in the State of familiar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD LYNCH, PAUL W. 5745 SANDPIPER PL FT. MYERS FL	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Replace) LETE	nized by the corpo Statutes. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 2.5 STREET ADDRESS 2.4 CITY-ST-ZIP	pration's bi	oard of directors. I hereby acceptions acception of the control of	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition	25024 /44
office or in agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State of familiar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD LYNCH, PAUL W. 5745 SANDPIPER PL FT. MYERS FL PD	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Replace) LETE	nized by the corpo Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	gration's bi	PARTITIONS OF THE CONTROL OF THE CON	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition	2E034 /44
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME NAME	registered agent, or both, in the State of familiar with, and accept the oblig Signature, board or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD-LYNCH, PAUL W. 5745 SANDPIPER PL FT. MYERS FL PD BRAWNER, TERRY K.	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Regin	nized by the corpo Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	gration's bi	oard of directors. I hereby acceptions acception of the control of	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition	2E034 /44
office or in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST-ZEP TITLE NAME STREET ADDRESS CITY- ST-ZEP TITLE NAME STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State of familiar with, and accept the oblig Signature, head or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL STD-LYNCH, PAUL W. 5745 SANDPIPER PL FT. MYERS FL PD BRAWNER, TERRY K. 77 S BIRCH RD	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Replace) LETE	nized by the corpo Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS	gration's bi	PARTITIONS OF THE CONTROL OF THE CON	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition	2E034 /44
office of in agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State of familiar with, and accept the oblig Signature, bood or printed name of registered so OFFICERS A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL. STD. LYNCH, PAUL W. 5745 SANDPIPER PL. FT. MYERS FL. PD. BRAWNER, TERRY K. 77 S BIRCH RD. FT LAUDERDALE FL. D. KLINGENSMITH, KIT A.	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Replace LETE	nized by the corpo Statutes. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	gration's bo	MICHES FL	OATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition	25024 /44
office of in agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZEP	registered agent, or both, in the State of Interest of Participants of Partici	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Replace LETE	nized by the corpo Statutes. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	gration's bo	OPERATED A II CLEVELAND A III CLEVELAND A	OATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition	25024 /44
office of in agent. I a signature 12. ITILE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME NAME	registered agent, or both, in the State of Interest of Participants of Partici	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	(NOTE: Regis	stand Agent signishing in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	gration's bo	MICHES FL	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition Addition	25024 /44
office of in agent. I a signature 12. ITILE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of Interest of Partial Name of Registered agent, and accept the oblig Signature, board or printed name of registered agencies. A CEOD LAGESCHULTE, DAVID L. 2644 SHRIVER DR. FT. MYERS FL. STD. LYNCH, PAUL W. 5745 SANDPIPER PL. FT. MYERS FL. PD. BRAWNER, TERRY K. 77 S. BIRCH RD. FT. LAUDERDALE FL. D. KLINGENSMITH, KIT A. 1838 WHITE CAP CIR. N. FT. MYERS FL. D.	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	LETE LETE LETE LETE	stand Agent signishing in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	y y y y y y y y y y y y y y y y y y y	MYERS FL	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition	2E034 /44
office or in agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	registered agent, or both, in the State of Interest of Participants of Partici	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	LETE LETE LETE LETE LETE	stand Agent signishing in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	y y y y y y y y y y y y y y y y y y y	MYERS FL	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition Addition	2E034 /44
office of agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE	registered agent, or both, in the State of Interest of	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	LETE LETE LETE LETE LETE LETE	stand Agent signishing in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 STREET ADDRESS 5.5 STREET ADDRESS 5.5 STREET ADDRESS	y y y y y y y y y y y y y y y y y y y	OPERATED A II CLEVELAND A III CLEVELAND A	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition Addition	2E034 /44
office of agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME	registered agent, or both, in the State of Interest of Participants of Partici	e of Florida. Such changations of, Section 607.0 pert and site of applicable. IND DIRECTORS DE	LETE LETE LETE	ntized by the compositatives. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 22 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP	y y y y y y y y y y y y y y y y y y y	MYERS FL	CATE FICERS AND	DIRECTO DIRECTO Change Change Change	FLS IN 12 Addition Addition Addition	25024 /44
office of in agent. I a signature 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS	registered agent, or both, in the State of Interest of	e of Florida. Such changations of, Section 607.0 pent and site of applicable. IND DIRECTORS DE	LETE LETE LETE LETE LETE LETE	rized by the corpo Statutes. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 22 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	y y y y y y y y y y y y y y y y y y y	MYERS FL	CATE FICERS AND	DIRECTO Change	RS IN 12 Addition Addition Addition	25024 /44
office of agent. I a SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP	registered agent, or both, in the State of Interest of	e of Florida. Such changations of, Section 607.0 pert and site of applicable. IND DIRECTORS DE	LETE LETE LETE LETE	ntized by the compositatives. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 22 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 STREET ADDRESS 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP	y y y y y y y y y y y y y y y y y y y	MYERS FL	CATE FICERS AND	DIRECTO DIRECTO Change Change Change	FLS IN 12 Addition Addition Addition	25024 /44

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 Statutas. 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, with all other like empowered.

Q1	6	м	٨	TI	\$ E	>⊏	

941-275-6139