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Apr 22 1997 8:00am
Secretary of State



PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # L89549 (4)
1. Corporation Name
M. J. VAUPEL, INC.

Principal Place of Business
4411 BEE RIDGE ROAD
SARASOTA FL 34233
US

Mailing Address
4411 BEE RIDGE ROAD
SARASOTA FL 34233-2514
US



2. Principal Place of Business
21 6940 Corral Gate Ln
Suite, Apt. #, etc.
22
City & State
23 Sarasota FL
Zip
24 34241
Country

2a. Mailing Address
25 6940 Corral Gate Ln
Suite, Apt. #, etc.
26
City & State
27 Sarasota FL
Zip
28 34241
Country

3. Date Incorporated or Qualified
07/16/1990
3a. Date of Last Report
04/09/1996
4. FEI Number
65-0209762
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

9. Name and Address of Current Registered Agent

VAUPEL MICHAEL JEFFREY
6463 FRIENDSHIP DRIVE
SARASOTA FL 34241
6940 Corral Gate Lane

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 *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	VAUPEL, M J	6463 FRIENDSHIP DR	SARASOTA FL	<input type="checkbox"/>
V	VAUPEL, LINDA	6463 FRIENDSHIP DR	SARASOTA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
1.1	1.2	1.3	1.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1	2.2	2.3	2.4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1	3.2	3.3	3.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1	4.2	4.3	4.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1	5.2	5.3	5.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1	6.2	6.3	6.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* LINDA J. VAUPEL 4-14-97 941-924-7858
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)