

FILE NOW: Fee after May 1, will be \$588.75

APPROVED
AND
FILED

1997 MAR 11 PM 12: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILING FEE

\$ 203.75

Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT # L94000000745

WODLINGER INTERNATIONAL, L.C.
~~& CUMMINGS & LOCKWOOD~~
~~3001 TAMiami TRAIL NORTH~~
NAPLES FL 33940

1a. Principal Place of Business Address

~~& CUMMINGS & LOCKWOOD~~
~~3001 TAMiami TRAIL NORTH~~
NAPLES FL 33940

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business

3355 Tamiami Trail N

2a. Mailing Address

3355 Tamiami Trail N

3. Date Organized or Qualified

01/01/1995

3a. State of Formation

FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

Zip

34103

Country

USA

Zip

34103

Country

USA

4. FEI Number

65-0545841

☐ Applied For

☐ Not Applicable

5. Date of Last Report

04/26/1996

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

~~COX, JOE B~~
~~& CUMMINGS & LOCKWOOD~~
~~3001 TAMiami TRAIL NORTH~~
NAPLES FL 33940

Name

MARK L WODLINGER

Street Address (P.O. Box Number is Not Acceptable)

3355 TAMiami TRAIL N

Suite, Apt. #, etc.

City

NAPLES

Zip Code

FL

34103

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

3 FEBRUARY 1997

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR	WODLINGER, MARK L	3355 TAMiami TRAIL NORTH	NAPLES FL, 34103
MEM	WODLINGER, MARK L	3355 TAMiami TRAIL NORTH	NAPLES FL, 34103
MEM	WODLINGER, MARILYN B	3001 3355 TAMiami TRAIL NORTH	NAPLES FL, 34103
MEM	COX, JOE B	3001 TAMiami TRAIL NORTH	NAPLES FL

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****203.75 ****203.75

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

MARK L WODLINGER

3 FEBRUARY 1997

941

062-1118

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #