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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

EYE OF THE LIZARD, INC.

Principal Place of Business

Mailing Address

## FILED Jan 28 1998 8:00am Secretary of State



4877 NORTH A1A 4877 NORTH A1A VERO BEACH FL 32963 VERO BEACH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/11/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0318259 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. 24 29 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent SCHORNER, JAMES A. 505 BEACHLAND BLVD. Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32963 83 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE Change TITLE 1.1 TITLE KNAPP, VIRGINIA M. NAME 1.2 NAME 201 SANDPIPER POINT 1.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE WYGONIK, MARK P. 2.2 NAME NAME 2239 VERO BEACH AVENUE 2.3 STREET ADDRESS STREET ADDRESS VERO BEACH FL 2.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change ☐ Addition TITI F 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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, of on an attachment with an address.

VIRGINIA M. KNAPP