CR2E034 (11/98)

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90326 048 \*\*\*150.00

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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # M05677

1. Corporation Name

MYERS, BRETTHOLTZ & LILES, P.A.

Principal Place	of Business	Mailing Address							
12671 WHITEHA	LL DRIVE	12671 WHITEHALL DRIVE							
FT. MYERS FL 33907-2626		FT. MYERS FL 33907-2626				DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualifed			
						09/25/1984			
3 Driveinal Di	and of Puninner	2a. Mailing Address				4. FEI Number		Ar	plied For
	ace of Business	<b>├</b> ¬				59-2445709			ot Applicable
Suite, Apt.	# 010	Suite, Apt. #, etc.			· · · ·				Additional -
	#, etc.	27			-	5. Certifcate of Status Desired			equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip Country				8. This corporation owes the currer	t vear Inta	anaible	
—, ·	[25]	29 30				Personal Property Tax.		☐Yes	X√No
24	9. Name and Address of Current		<u>,                                     </u>			10. Name and Address of New Re	gistered A	Agent	
			81	1 1	Name				-
MYE	rs, richard allen		_		n:	(D.O. D. Al. Lasis Nat Associate	<u></u>		
	1 WHITEHALL DR		82	2  :	Street Addre	Address (P.O. Box Number is Not Acceptable)			
FT. N	MYERS FL 33907		83	3			_		
			L					<del></del>	
			84	4 (	City		FL	85   Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the abov	ve-n	named corpo	ration submits this statement for the p	urpose of o	changing its	registered
office or n	egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was autr	iorizea o	y un	e corporation	y's board of directors. I hereby accept	tne appoin	itment as re	gistereu
-	if ignitial will, and accept the congar	1010 01, 0000011 001 1000011 1010							l
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: R				ent si	ignature required		DATE		
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFI	CERS AN		
TITLE	DP	☐ DELETE	1.1 TITLE		-			Change	☐ Addition
NAME	MYERS, RICHARD ALLEN		1.2 NAME		1				ľ
STREET ADDRESS	12671 WHITEHALL DR.		1.3 STRE		DDRESS				
CITY-ST-ZIP	FT. MYERS FL 33907		1.4 CITY-	ST-Z	<u> </u>				
TITLE	DV	☐ DELETE	2.1 TITLE					Change	☐ Addition
NAME	BRETTHOLTZ, STEVE M		2.2 NAME		ŀ				1
STREET ADDRESS	12671 WHITEHALL DR.		2.3 STRE		DDRESS	<b>-</b>			
CITY-ST-ZIP	FORT MYERS FL 33907	•	2. 4 CITY-		ZIP		· · ·		
TITLE	DST	☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME	LILES, TERRY A		3.2 NAME			•			
STREET ADDRESS	12671 WHITEHALL DR.		3.3 STREE		DDRESS				}
CITY-ST-ZIP	FORT MYERS FL 33907		3.4. CITY-		7IP				\$
TITLE	1 0111 111110 1 2 00307	· DELETE	4.1 TITLE					Change	Addition
NAME		1	4. 2 NAME						
			4.3 STREE		DUBESS				
STREET ADDRESS	·		4.4 CITY-						
CITY-ST-ZIP	·	☐ DELETE	5.1 TITLE		<del>"</del>		•	Change	☐ Addition
TITLE			5.2 NAME					· ·	
NAME			5.3 STRE		DDRESS				l
STREET ADDRESS			5.4 CITY-						
CITY-ST-ZIP				TITLE				Change	Addition
TITLE .			6.2 NAME					:- J-	_ " " " "
NAME			63 STRE		DDRESS				

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 changes or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR