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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

M66620

(9)

DOCUMENT # 1, Corporation Name MUNN, INC.

Principal Place of Business	Mailing Address	
830 FLORIDA AVE. COCOA FL 32922	830 FLORIDA AVE. COCOA FL 32922	

FILED Mar 25 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualified 01/26/1988			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For		
21		26			59-2875264	Not Applicable		
Suite, Apt. (f, etc.	Suite, Apt. #, etc.			Certificate of Status Desired Second Fee Required Fee Required			
City & State	*7	City & State			6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the current	year Intang ble		
24	25	29	30		Personal Property Tax due June 30.			
<u></u>	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Age	nt		
MU	NN, FRANK W.		81	Name				
1274 ROYAL BIRKDALE CIR. ROCKLEDGE FL 32955			82	82 Street Address (P.O. Box Number is Not Acceptable)				
			100	Street Address (F.O. Dox Matriber is Not Acceptable)				
1.0	01122942 1 0 40000		83	3				
			L.			= 1 7:- O. d.		
			84	City	FL ⁸	S Zip Code		
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607 0502 gistered agent, or both, in the State n familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such change was ations of, Section 607.0505, F	ites, the above authorized be lorida Statute	ve-named corpora by the corpora es.	poration submits this statement for the purpose of chation's board of directors. I hereby accept the appoint	anging its registered ment as registered		
SIGNATURE					1//6/98			
	Bignature, typed or pointed name of registered age			gent signature requ	ired when reinstating) PATE	DECTORS MI 40		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DI	Change Addition		
TITLE	PST TO STANK W	DELETE	1.1 TITLE	İ	Ц	Change [1] Abouton		
NAME	MUNN, FRANK W.		1.2 NAME					
STREET ADDRESS	1274 ROYAL BIRKDALE CIR		1.3 STREE	T ADDRESS				
CITY - ST - ZIP	ROCKLEDGE FL		1.4 CITY-	ST-ZIP		Obecce Addition		
TITLE	D	DELETE	2.1 TITLE	1	L	Change [] Addition		
NAME	MUNN, FRANK W.		2.2 NAME		١			
STREET ADDRESS	1274 ROYAL BIRKDALE CIR		2.3 STREE	T ADDRESS				
CITY+ST-ZIP	ROCKLEDGE FL		2. 4 CITY	- ST - ZIP				
TITLE	VSD	☐ DELETE	3.1 TITLE		П	Change [] Addition		
NAME	MUNN, MAUREEN E.		3.2 NAME	[
STREET ADDRESS	1274 ROYAL BIRKDALE CIR.		3.3 STREE	T ADDRESS				
CITY - ST - ZIP	rockledge fl		3.4. CITY	- ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE		, U	Change Addition		
NAME			4. 2 NAMI	Ε		,		
STREET ADDRESS			4.3 STREE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		rana		
TITLE		DELETE	5.1 THTLE			Change [] Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	ET ADDRESS				
CITY-ST-ZIP			5.4 CITY	ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change Addition		
NAME			6.2 NAME					
STREET ADDRESS				ET ADDRESS				
			6.4 CITY-					
CITY-ST-ZIP	ertity that the information supplied w	ith this filing does not qualify	for the exem	ption stated in	n Section 119.07(3)(i), Florida Statutes. I further certify	that the information		
4 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								

indicated on this annual report or supplied with that learn 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 example of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1-407-632-9160