

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # M75535 (8)

1. Corporation Name

BONITA GATEWAY CORPORATION



Principal Place of Business

12699 NEW BRITANNY BLVD
2000 MCGREGOR BLVD., SUITE #2
FORT MYERS FL 33907

Mailing Address

% R. SCOTT BARKER
P.O. DRAWER 150
FT MYERS FL 33902-0150
33907

3. Date Incorporated or Qualified
04/06/1988

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0109018

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

10. Name and Address of New Registered Agent

BARKER, R. SCOTT
2000 MCGREGOR BLVD., SUITE #2
FORT MYERS FL 33901

81. Name

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

12699 NEW BRITANNY BLVD

83.

84. City
FORT MYERS

FL

85. Zip Code
33907

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 (type or print name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PVST
BARKER, R. SCOTT
2000 MCGREGOR BLVD., SUITE #2
FORT MYERS FL 33901

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BARKER, R. SCOTT
2000 MCGREGOR BLVD., SUITE #2
FORT MYERS FL 33901

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
[] DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
[] DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

12699 NEW BRITANNY BLVD
FORT MYERS, FL 33907

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

12699 NEW BRITANNY BLVD
FORT MYERS, FL 33907

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08.05.96

741-275-0000

CR2E034 (3/96)