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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M75535

(8)

BONITA GATEWAY CORPORATION

FILED
May 09 1997 8:00am
Secretary of State

Change

Change

Addition

Addition

Change Addition

Principal Place 12699 NEW BRI FORT MYERS F US	TTANY BLVD.	P.O. DRAWER 159	12699 NEW BRITTANY BLVD P.O. DRAWER 159 FT MYERS FL 33902-0159							
		US				3. Date Incorporated or Qualified 04/06/1988		te of Last)9/1996	Report	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied Fo				
Suite, Apt.	# Ala	Suite Ant # etc	Suite. Apt. #, etc.			65-0109018			lot Applicable Additional	
22	#, etc.	27				5. Certificate of Status Desired		4	Required	
City & State	0	City & State	City & State			6. Election Campaign Financing	\$5.00 May Be			
23		28	and the second s			Trust Fund Contribution			to Fees	
Zip	Country	Ζφ	Cou	ntry		8. This corporation has liability for intangible tax under s. 199.032,			s. 199.032,	
24	25	[29]	30			Florida Statutes Yes Yes You				
9, Name and Address of Current Registered Agent					Name	to. Name and Address of New Ne	gistered i	Agoill		
BARKER, R. SCOTT 12699 NEW BRITTANY BLVD. FORT MYERS FL 33901				B1						
				62	Street Add	et Address (P.O. Box Number is Not Acceptable)				
				83						
					A.:			10-11-7:		
				84	City		FL	85 <i>Z</i> ip	Code	
office or r	to the provisions of Sections 607. registered agent, or both, in the Si im familiar with, and accept the of	tate of Florida. Such change was	s authorizer	i bv	the corporat	ooration submits this statement for the pion's board of directors. I hereby acce	ournose of	Changing	its registered is registered	
SIGNATURE	Signature, typed or printed name of registere:	d agont and title if applicable (NO	OTE: Registerer		ent signature requi	red when reinstating)	DATE			
12.				3. ADDITIONS/CHANGES TO OFFICERS AND DIREC						
TITLE	PVST	☐ DELETE	1.1 10	Ιŧ				Change	Addition	
NAME	BARKER, R. SCOTT		1.2 NA	ME						
STREET ADDRESS				1.3 STREET ADDRESS						
CITY-ST-ZIP	FORT MYERS FL		1.4 CI	1.4 CITY-ST-ZIP						
TITLE	D	DELETE	2.1 10	I L F				∐ Change	Addition	
NAME	BARKER, R. SCOTT	_	2.2 N/	ME						
STREET ADDRESS			2.3 \$1	2.3 STREET ADDRESS						
CITY-ST-ZIP	FORT MYERS FL		2 4 CITY - ST - ZIP		S1-ZIP	No		□ e:		
TITLE		☐ DELETE	3.1 1	11.6				Change	Addition	
MARKE			3.2 N/	MF						

City-St-ZIP

14. 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 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 instee 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, or on an intachment with an address.

3 3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.4 CITY-\$1-ZIP

6.3 STREET ADDRESS

3 4. CITY - \$1 - ZIP

41 THLE

4 2 NAME

5 1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELFTE

☐ DELETE

DELETE

Will Kirkill to company