

FILED
Jun 16, 2004 8:00 am
Secretary of State

05-12-2004 90201 011 ***150.00

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000022900			
1. Entity Name VERANO, INC.			
Principal Place of Business 15051 SOUTH TAMiami TRAIL #203 FORT MYERS, FL 33908		Mailing Address 15051 SOUTH TAMiami TRAIL #203 FORT MYERS, FL 33908	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 81-0608222		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COSTELLO, TRUMAN J 12670 NEW BRITANNY BLVD. SUITE 101 FORT MYERS, FL 33907		7. Name and Address of New Registered Agent Name Theodore L. Tripp Street Address (P.O. Box Number is Not Acceptable) GARVIN & Tripp PA 2532 East First Street City Ft. Myers FL Zip Code 33901	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE See attached signature page DATE 4-14-04 (NOTE: Registered Agent signature required when re-registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Edward D. Adkins ☐ Delete 15051 S. TAMiami TR. #203 Fort Myers, FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Steven G. Levine ☐ Delete 15051 S. TAMiami TR. #203 Fort Myers, FL 33908	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Edward D. Adkins (Signature and Print Name of Officer or Director)		5/10/04 239-446-7737 Date Daytime Phone #	



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Document Number

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Business Entity Name

VERANO, INC.

FEI Number

810608222

FEI Number Status

Applied For

Not Applicable

Current

Certificate of Status Desired

Yes

No

Principal Place of Business

Address

15051 SOUTH TAMiami TRAIL #203

Suite, Apt. #, etc.

City, State

FORT MYERS

FL

Zip Code & Country

33908

Mailing Address

Address

15051 SOUTH TAMiami TRAIL #203

Suite, Apt. #, etc.

City, State

FORT MYERS

FL

Zip Code & Country

33908

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

-or- RA Business Name

Garvin & Tripp PA

Address

2532 East First Street

Suite, Apt. #, etc.

City, State

FORT MYERS

FL

Zip Code & Country

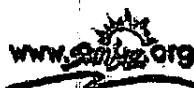
33901

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

Registered Agent Signature

Theodore L Tripp, Jr.



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Business Entity Name

VERANO, INC.

Election Campaign Financing Trust Fund Contribution Yes No

Officer/Director Name And Address

Title	DPS			
Name (Last, First, Middle, Title)	ADKINS	EDWARD	D	
-or- Entity Name				
Street Address	15051 SOUTH TAMiami TRAIL SUITE 203			
City, State	FORT MYERS	FL		
Zip Code & Country	33908			
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				

Attachment

66428372

P0300022780

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

List more than six Officers/Directors No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

D

Officer/Director Signature Edward D. Adkins

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