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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34811

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G. W. PLOSSL AND CO., INC.

Principal Place of Business Mailing Address 13652 PINE VILLA LANE 13652 PINE VILLA LANE FT. MYERS FL 33912-1616 FT. MYERS FL 33912 3a. Date of Last Report 3. Date Incorporated or Qualified 06/11/1996 07/22/1991 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 06-085 1529 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PLOSSL GEORGE W. 13652 PINE VILLA LANE 82 Street Address (P.O. Box Number is Not Acceptable) FT. MYERS FL 33912 83 R4 City Zip Code 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. Lan familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Significant report or protect recorded agent and title map percable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. CDPS DELETE Change Addition 1 | TITLE TITLE PLOSSL, GEORGE W. 1.2 NAME NAME 13652 PINE VILLA LANE STREET ADDRESS 1.3 STREET ADDRESS FT. MYERS FL 33912 CITY - ST - ZIP 1.4 CHTY - ST- ZIP DELETE Change Addition TITLE 21 TITLE PLOSSL, MARION L. NAME 22 NAME 13652 PINE VILLA LANE STREET ADDRESS 23 STREET ADDRESS FT. MYERS FL 33912 CITY-ST-ZIP 2 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE PLOSSL, KEITH R. 3.2 NAME NAME 3431 WINFAIR PLACE STREET ADDRESS 3.3 STREET ADDRESS MARIETTA GA 3.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-7:2 DELFTE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZP 5.4 CITY - S1 - ZIP DELETE Change ■ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CHTY-ST-ZIP CITY - S1 - 7(F

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this angular port or supplemental acquial 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 confortation or the receipt or the receipt of the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

GEW PLOSSE