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Mailing Address
15630 MCGREGOR BLVD.

SUITE 102 FORT MYERS FL 33808-2553

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300006409 (5)

THE ANCHOR GROUP, INC.

Principal Place of Business

15630 MCGREGOR BLVD.

FORT MYERS FL 33908

SIGNATURE

SUITE 102

| | | | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 01/27/1993 04/26/1996 | | | | |
|---------------------------|---|--|---|--------------------------|------------------------|---|---|------------------------------|-----------------------|--|
| 2. Principal F | lace of Business | 2a. Mailing Addr | ess | | | ······································ | | | plied For | |
| 21 | | 26 | 26 | | | 65-0384189 | Not Applicable | | | |
| Suite, Apt | #, etc | Suite, Apt. #, | Suite, Apt. #, etc | | | Certificate of Status Desired S8.75 Additional Fee Regulfed | | | | |
| 22 City & Stat | ······································ | City & State | | | | | | | | |
| | · | <u> </u> | 28 | | | Election Campaign Financing Trust Fund Contribution | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| 23 Zip | Country | | Zip Country | | | · · · · · · · · · · · · · · · · · · · | | | | |
| - -1 | | 29 | 30 | corre y | | 8. This corporation has liability for i | | | 199.032, | |
| 24 | 9. Name and Address of Current Registered Agent | | | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | | | |
| | | Helir vedistelen våeltr | | 81 | Name | IV. Halle and Address of New Ne | JISIDI OU A | Mour | | |
| POWELL, WILLIAM M | | | | | | | | | | |
| 2002 DEL PRADO BLVD. | | | | 82 | Street Ad | dress (P.O. Box Number is Not Acceptable) | | | | |
| SUITE 105 | | | | | | | | | | |
| CAP | E CORAL FL 33990 | | | 83 | | | | | į | |
| | | | | 84 | City | | | 85 Zip C | Code | |
| | _ | | | | , | | FL | | | |
| office or r agent. I a | to the provisions of Sections 607 registered agent, or both, in the sum familiar with, and accept the i | 7.0502 and 607.1508, Florid State of Florida. Such chan obligations of, Section 607. | da Statutes, the ge was authoriz 0505, Florida St | above ed by atutes | named co the corpor | orporation submits this statement for the pration's board of directors. I hereby accept | urpose of o at the appo | changing its intment as i | registered registered | |
| SIGNATURE | Say after Typed or printed name of register | ed agent and title if applicable | (NOTE: Register | ed Age | nt signature rec | guired when reinstating) | DATE | | | |
| 12. | OFFICERS | S AND DIRECTORS | 13 | | | ADDITIONS/CHANGES TO OFFICE | ERS AND | DIRECTOR | \$ IN 12 | |
| TITUE | DPS DELETE | | | 11 TITLE | | | | Change | Addition | |
| NAME | JASINSKI, STANLEY | | | 12 NAME | | | | | | |
| STREET ADDRESS | 138 CRESCENT DRIVE | | 13 | STAFFT | ADDRESS | | | | | |
| CITY-SI-7IP | FT MYERS FL 33919 | | | 1.4 CITY-ST-ZIP | | | | | | |
| TIFLE | VI | □ DE | | TITLE | | | | Change | ☐ Addition | |
| NAME | HANSEN, ASGER | | | 2.2 NAME | | | • | | 71331777 | |
| | 12120 SIESTA DR. | | | | ADDRESS | | | | | |
| STREET ADDRESS | FT MYERS BEACH FL 339 | 21 | | | - 1 | | | | | |
| CITY-ST ZIP TITLE | 11 MILIO DENOTITE 505 | | | CITY S | 1+2IP | | | Change | Addition | |
| | DELETE | | | 3.1 T(TLE 3.2 NAME | | | , | Olialigo | L. Noditiviii | |
| NAME | | | | | . 1 | | | | | |
| STREET ADORESS | | | | | AODRESS | | | | | |
| CHT+ST-7IP | | | | CITY - S | T-ZIP | | | | 1 7 4 10 11 | |
| 117LE | | □ DE | | TITLE | - | | ŀ | Change | Addition | |
| NAME | | | 4. 2 | NAME | ! | | | | | |
| STREET ADDRESS | | | 4.3 | STREET | ADDRESS | | | | Ī | |
| CITY - ST - ZIP | | | | CITY-S | r-ZIP | | | | | |
| TILLE | | □ DE | LETE 5.1 | TITLE | | | 7 | Change | ☐ Addition | |
| NAME | | | 5.2 | NAME | | | | | | |
| STREET ADDRESS | 1 | | 5.3 | STREET | ADDRESS | | | | | |
| CHY+ST-ZW | | | 5.4 | CITY-S | 1-ZIP | | | | | |
| THLE | | ☐ DE | | TITLE | | | | Change | Addition | |
| NAME | | | 62 | NAME | 1 | ·. | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| City-St-Zie | | | | CITY-S | - 1 | | | | | |
| | L | oplied with this filing does | | | | led in Section 119.07(3)(i), Florida Statute | s. I further | certify that | the | |
| informatio | n indicated on this annual repor | t or supplemental annual r | eport is true and | accu | rate and th | nat my signature shall have the same lega | effect as | if made und | der oath, that | |