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



PROFIT CORPORATION ANNUAL REPORT 1998 PROFIT FLORIDA DEPARTMENT OF STATE Sandre B. Mortham Secretary of State DIVISION OF CORPORATIONS DOCUMENT # P93000046225 (7)			Apr 28 1998 8:00am Secretary of State	
Principal Place of Business 8540 COLLEGE PARKWAY FT MYERS FL 33919 2. Principal Place of Business 2a. Mailing Address				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/30/1993 4. FEI Number Applied For
21		26		65-04 19744 Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		Certificate of Status Desired Status Desired Status Desired Status Desired Status Desired Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	Zip	Country	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent LANGLEY, JAMES C			81 Name	10. Name and Address of New Registered Agent
	MYERS FL 33919 to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig-	p2 and 607.1508, Florida Statut of Florida, Such change was a ations of, Section 607.0505, Flo	83 84 City tes, the above-named corauthorized by the corpora orida Statutes.	poration submits this statement for the purpose of changing its registered attion's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered ago OFFICERS AN		E Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Change Addition
name Street address	CHAZAL, RICHARD A 8540 COLLEGE PARKWAY		1.2 NAME 1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	FT. MYERS FL 33919	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, RICHARD H 8540 COLLEGE PARKWAY FT MYERS FL 33919	_ steen	2.2 NAME 2.3 STREET ADDRESS 2. 4 City-St-Zip	C Original Control of the Control of
TITLE	V	☐ DELETE	3.1 TITLE	Change Addition
NAME Street address	HOFFMAN, ELIOT B 8540 COLLEGE PARKWAY		3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	FT. MYERS FL 33919	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME	CONRAD, JAMES A	Steel	4.2 NAME	
STREET ADDRESS	8540 COLLEGE PARWAY		4.3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS FL 33919		4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	V TOGGART, EDWARD J 8540 COLLEGE PARKWAY	☐ DELETÉ	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP	FT. MYERS FL 33919		5.4 CITY-ST-ZIP	
TITLE	<u>V</u>	DELETE	6.1 TITLE	Change Addition
NAME STREET ADDRESS	DANZIG, MICHAEL D 8540 COLLEGE PARKWAY		6.2 NAME 6.3 STREET ADDRESS	

14. Thereby 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 InGrecoiver or trusted employered 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 fin attagrament with an address.

FILED