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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000003521 (9)

1. Corporation Name

ENTERPRISE LEHIGH, INC.



Principal Place of Business

201 EAST JOEL BLVD.
LEHIGH FL 33936

Mailing Address

201 EAST JOEL BLVD.
LEHIGH FL 33936

2. Principal Place of Business

2a. Mailing Address

21 226 E. Joel Blvd

26 226 E. Joel Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Lehigh Acres, FL

28 Lehigh Acres, FL

Zip

Country

Zip

Country

24 33936

25 USA

29 33936

30 USA

9. Name and Address of Current Registered Agent

ALLISON, JANET
201 EAST JOEL BLVD.
LEHIGH FL 33936

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
226 E. Joel Blvd

83

84 City

FL 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Janet Allison

(If filer is Registered Agent signature, register filer name in Block 12.)

DATE

3/7/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE

1.1 TITLE

NAME WHYTE, W D
STREET ADDRESS 201 E. JOEL BLVD.
CITY-STATE-ZIP LEHIGH FL 33936

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE D ☐ DELETE

2.1 TITLE

NAME LIVINGSTON, WILLIAM I
STREET ADDRESS 201 E. JOEL BLVD.
CITY-STATE-ZIP LEHIGH FL 33936

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE DVT ☒ DELETE

3.1 TITLE

NAME FORTANA, JAMES G
STREET ADDRESS 201 E. JOEL BLVD.
CITY-STATE-ZIP LEHIGH FL

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE DP ☒ DELETE

4.1 TITLE

NAME GOULD, GERALD
STREET ADDRESS 7500 RED ROAD STE. A-2
CITY-STATE-ZIP SOUTH MIAMI FL

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE DV ☒ DELETE

5.1 TITLE

NAME FINE, MARTIN
STREET ADDRESS 100 S.E. 2ND STREET STE. 3600
CITY-STATE-ZIP MIAMI FL

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE VS ☐ DELETE

6.1 TITLE

NAME ALLISON, JANET
STREET ADDRESS 201 EAST JOEL BLVD
CITY-STATE-ZIP LEHIGH ACRES FL

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

V/D ☐ Change ☒ Addition

Gregory M. Morris
226 E. Joel Blvd
Lehigh Acres, FL 33936
P/D ☒ Change ☐ Addition

226 E. Joel Blvd

V/T/D ☐ Change ☒ Addition

Laura A. Holquist
226 E. Joel Blvd
Lehigh Acres, FL 33936

500001748505 ☐ Change ☐ Addition

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***200.00

☐ Change ☐ Addition

V/S/D ☒ Change ☐ Addition

226 E. Joel Blvd

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee 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 attachment with an address.

SIGNATURE:

Janet Allison, Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/96

941-368-3229

Daytime Phone #

CR2E034 (12/95)