

009 / 443

FILED
Jul 09, 1999 8:00 am
Secretary of State
07-09-1999 90015 019 ***550.00

THOMAS W. HINKLE ARCHITECT, INC.

Mailing Address
222 SW 42ND TER
CAPE CORAL FL 33914

4. FEI Number	65-0506573	Applied For	
		Not Applicable	
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

DATE _____

1.E 1.1E 1.1EET ADDRESS 1.1Y-ST-ZIP	DP HINKLE, THOMAS W 222 SW 42ND TER CAPE CORAL FL 33914	<input type="checkbox"/> DELETE	1.1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.E 2.1E 2.1EET ADDRESS 2.1Y-ST-ZIP	DT HINKLE, ROBERTA J 222 SW 42ND TER CAPE CORAL FL 33914	<input type="checkbox"/> DELETE	2.1.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.E 3.1E 3.1EET ADDRESS 3.1Y-ST-ZIP		<input type="checkbox"/> DELETE	3.1.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.E 4.1E 4.1EET ADDRESS 4.1Y-ST-ZIP		<input type="checkbox"/> DELETE	4.1.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.E 5.1E 5.1EET ADDRESS 5.1Y-ST-ZIP		<input type="checkbox"/> DELETE	5.1.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.E 6.1E 6.1EET ADDRESS 6.1Y-ST-ZIP		<input type="checkbox"/> DELETE	6.1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

CR2E034 (5/99)