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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000058819 (1)

INTERIOR RESOURCES OF LEE COUNTY, INC.

Principal Place of Business		Mailing Address	
27713 TENNESSEE STREET BONITA SPRINGS FL 33923	•	27713 TENNESSEE STREET BONITA SPRINGS FL 33923	Vara of Common

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98 OCT 23 PM 3:55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Principal Place of Business	Mailing Address					
27713 TENNESSEE STREET	27713 TENNESSEE STREET					
BONITA SPRINGS FL 33923	BONITA SPRINGS FL 33923	3 General Coesting	DO NOT WRITE IN TH	IS SPACE		
			3. Date Incorporated or Qualified	·····		
			08/09/1994			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21 SAME	26 SAME		65-0510359	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	_	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be		
23	28		Trust Fund Contribution	Added to Fees		
Zip Country 25	Zip 3	Country	8. This corporation owes or has paid the o	current year Intangible		
	29 3 of Current Registered Agent	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
WIECHELT, LORI	10.	Th				
27713 TENNESSEE STREET		82 Street Addre	delegan (D.O. Day Nivelancia Nat Assastable)			
BONITA SPRINGS FL 33923		62 Street Addre	82 Street Address (P.O. Box Number is Not Acceptable)			
		83				
		84 City	F	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.						
	IECHELT - DIRECTOR	oa statutes.	රි-	31-98		
Signature, typed or printed name of rec	gistered agent and title if applicable. (NOTE:)	Registered Agent signature require	ed when reinstating) DATE			
	ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A			
TITLE D	☐ DELETÉ	1.1 TITLE		Change Addition		
NAME WIECHELT, LORI STREET ADDRESS 27713 TENNESSEE ST	TOCCT	1.2 NAME	900002674 -10/28/98	1 <u>509-</u> -2		
DOMEST OPPRIOR OF	* *	1.3 STREET ADDRESS 1.4 CITY - ST- ZIP	-1U/25/38	-U1U54U14 ****400_00		
CITY-ST-ZIP BUNITA SPRINGS FL	DELETE	2.1 TOTLE	東京東京中[[[]]	Change Addition		
NAME		2.2 NAME	900002674			
STREET ADDRESS		2,3 STREET ADDRESS	-10/28/98	-01054015		
CITY-ST-ZIP		2. 4 CITY - ST-ZIP	****150.00	****1S0.00		
TITLE	DELETE	3.1 TITLE		Change Addition		
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY - ST - ZIP				
TITLE	☐ DELETE	4,1 TITLE		☐ Change ☐ Addition		
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	DELETE	5.1 TITLE	•	Change Addition		

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby 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 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.

5.2 NAME

6.1 TILE 6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: Low D. Wise

8-31-98

947-84-8766

Addition