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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000074332 (5)

A TO Z MANAGEMENT OF BONITA SPRINGS, INC.

9203 BONITA BEACH ROAD S uite 210 Bonita Springs Fe 33923 US		9200 BONITA BEACH ROAD BUITE 210 BONITA SPRINGS FL 34155-4278 US			
				3. Date Incorporated or Qualified 10/04/1994	3a. Date of Last Report 04/02/1996
2. Principal Pi	ace of Business	2a. Mailing Address	747	4. FEI Number	Applied For
	5 Tennesse St	26 Y O DOX 1	171	65-0525354	Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Co V	Hu Spording FT	Bonita Sprir	as FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
ZIPILLE	Country	1800 hin	Country	8. This corporation has liability for i	
24 341	35 25	29 54135-14130	0 V5	7 101104 01010100	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Ag					platered Agent
STEWART, JAMES C JR. 81 Name					
STEWART & STORTER, ATTORNEYS AT LAW 82 Street Address (P.O. Box Number is Not Acceptable)					
1725 COUNTY ROAD 951, SUITE 106					
GOLI	DEN GATE FL 33999		83		
			84 City		FL 85 Zip Code
44. Our work to the provinces of Sections 507 0502 and 507 1508. Floride Statutes the above approach or provinces this statement for the purpose of changing its registered					
I office or registered agent, or hold, 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	Signature, typod or printed frame of registered agent	and title if applicable (NOTE: R	legistered Agent signature requ	vired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	oppliger, irene		1.2 NAME		
STREET ADDRESS	24181 S. TAMIAMI TRAIL, SUITE	2	1.3 STREET ADDRESS		
CiTY-ST-ZIP	BONITA SPRINGS FL 33923		1.4 CITY - ST - ZIP	·	
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		İ
CHY-ST-ZIP			2. 4 CITY-ST-ZIP		
THTLE		☐ DELETE	3.1 TITLE	•	Change Addition
MAM!			3.2 NAME		
STREET ADDIRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		- I DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE		Change L Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		[STETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
TITLE		L, title	5.2 NAME		
NAME					
STREET ADDRESS			5.3 STREET ADDRESS		4
CITY-ST-ZIP		DELETE	5.4 City-St-Zip 6.1 Title		Change Addition
TITLE NAME		Date it	6.2 NAME		manufacturing States conditions
			6.3 STREET ADDRESS		
STREET ADDRESS			6.4 CITY-ST-ZIP		
14. 1 do here	L by certify that the information supplied	with this filling now not quality	for the exemption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the
information indicated on this annual report or supplemental antiquity admits true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver of the corporation of the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of the corporation of					
appears in Block 12 or Block 13 if changed, or or an attackment with an address.					
A FIRST ROOM BOW					