PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000085691 1. Corporation Name

SHELLS OF FORT MYERS, INC.

Principal Place of Business 16313 NORTH DALE MABRY HIGHWAY SUITE 100 **TAMPA FL 33618** 

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt, #, etc.

16313 NORTH DALE MABRY HIGHWAY

SUITE 100 TAMPA FL 33618

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27

## Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90113 001 \*3,000.00



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date incorporated or Qualifed

5. Certifcate of Status Desired

11/18/1994

65-05594<u>55</u>

4. FEI Number

Zip	City & State		City & S	City & State			6. Election Campaign Financing \$5.00 May Be			
S. Name and Address of Current Registered Agent  GIORDAND, JOHN N 220 SOUTH FRANKLIN STREET TAMPA FL 33602  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Fiorids Statutes. The above-named corporation submits this statement for the purpose of changing its registered defined or registered agent of 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, Florids Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. In In L.  12. OFFICERS AND DIRECTORS  14. In In L.  13. In L.  14. In L.  15. In In L.  16. In L.  17. In L.  18. In	23						Trust Fund Contribution		Added t	o Fees
9. Name and Address of Current Registered Agent  GIORDANO, JOHN N 220 SOUTH FRANKLIN STREET TAMPA FL 33602  11. Pursuant to the provisions of Sections 607 6562 and 607 1506. Florids Statutes. He above-named corporation submits this statement for the purpose of changing its registered signers, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signers, are both, and accept the obligations of, Section 607 5056, Florids Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II 12 In TIME  14. CITY ST.2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II 12 In TIME  16. Additional accept the support of the support o	Zip	Country				y	8. This corporation owes the curr			4
GIORDANO, JOHN N 220 SOUTH FRANKLIN STREET TAMPA FL 33802  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-need corporation submits this statement for the purpose of changing it registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, and show the provisions of Sections 607 0505, Florida Statutes.  11. Pursuant to the provisions of Sections 607 0505, Florida Statutes. The above-need corporation submits this statement for the purpose of changing it registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, and the purpose of changing its registered agent, and the	24	25			0					KINO I
GIORDANO, JOHN N 220 SOUTH FRANKLIN STREET TAMPA FL 33602  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby eccept the appointment as registered agent, and accept the obligations of, Section 607.0505, Floridal Statutes.  SIGNATURE Signature, Nyed or précide name of registered agent autre it auplicable.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANSES TO OFFICERS AND DIRECTORS IN 12.  TITLE D HATTAWAY, WILLIAM HATTAWAY, WILLIA		9. Name and Address of Current	Registered A	gent			10. Name and Address of New F	tegistered /	Agent	
220 SOUTH FRANKLIN STREET TAMPA FL 33802  133  84	0.05				81	Name				•
220 SOUTH FRANKLIN SIREET TAMPA FL 33602  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby eccept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, Nyed or privad name of registered agent and rise if applicable.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANSES TO OFFICERS AND DIRECTORS IN 12.  NIME HATTAWAY, WILLIAM 13.1 TITLE D D DELETE 11. TITLE D D DELETE 21. TITLE D D DELETE 22. TITLE D D DELETE 22. TITLE D D DELETE 23. TITLE D D DELETE 23. TITLE D D DELETE 23. TITLE D D DELETE 24. COPY-57.2P 17. AMPA FL 10. Change Addit 10. ADDITIONS/CHANSES TO OFFICERS AND DIRECTORS IN 12.  10. TAMPA FL 10. Change Addit 10. Change Addit 10. Change Addit 10. Title D DELETE 31. TITLE 32. TITLE D Change Addit 10. Change Addit 10. Title D DELETE 31. TITLE D Change Addit 10. Title D DELETE 31. TITLE D Change Addit 10. Title D Change Addit 11. TITLE D Change Addit 12. Title D Change Addit 13. STREET ADDRESS CITY-57.2P TITLE D Change Addit 14. CITY-57.2P TITLE D Change Addit 15. TITLE D DELETE 35. TITLE D Change Addit 15. TITLE D Change	·					Street Add	ress (P.O. Box Number is Not Accepta	ble)		_
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office or registered agent, or both, in the State of Florida, Suction 607/9505, Florida Statutes.    Signature   S					84	City		FL	103 247	J0000
office or registered agent, or both, in the State of Florida, Suction 607/9505, Florida Statutes.    Signature   S	11. Pursuant	to the provisions of Sections 607.0502	and 607.1508.	Florida Statutes,	, the abov	re-named corp	poration submits this statement for the	purpose of	changing its	registered
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Signature, typed or printed name of registered agent and state if applications.   (NoTe: Registered Agent agenture required when invisibility)   DATE	agent. I ai	m ramiliar with, and accept the obligati	ons or, Section	607.0303, FIGHG	a Statute	<b>3.</b>				
12.	SIGNATURE	Slangture, hand or printed name of registered agent	and title if soplicable	(NOTE: Re	egistered Age	ent signature require	ed when reinstating)	DATE	•	'
TITLE	12.			. (10.1211				FICERS AN	D DIRECTO	R\$ IN 12
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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 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 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 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 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 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 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 indicated on this annual report of the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; that I am an indicated on the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if	44 I horoby	ertify that the information supplied wit	h this filing doe	s not qualify for the	he eveno	tion stated in	Section 119.07(3)(i), Florida Statutes.	I further cert	tify that the i	information

Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

