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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # 1. Corporation Name	P9400009370
STEPHEN J. TRUDNA	AK, P.A.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90010 006 ***150.00



									/III II		
Principal Place	of Business	Ma	ailing Address				114411481				
3461 BONITA BAY BLVD											
BONITA SPRINGS FL 34134 US BONITA SPRINGS FL 34134 US					DO NOT WRITE IN THIS SPACE						
					3. Date Incorporated or Qualifed 12/27/1994						
0.01		720	Mailing Address				4. FEI Number		Anni	lied For	
	ace of Business	\vdash	. Mailing Address						. ``	Applicable	
21	# _t_	26	Suite Apt # etc				65-0548578	\$8.7			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			-	5. Certificate of Status Desired				
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip	Country		Zip	Country	,		8. This corporation owes the current year	r Intangible		ļ	
24	25	29	30				Personal Property Tax.	Yes		□No	
	9. Name and Address of Current	Regis	tered Agent				10. Name and Address of New Registe	red Agent			
				81	Na	me					
	DNAK, STEPHEN J			82	Str	eet Addre	ess (P.O. Box Number is Not Acceptable)	-			
	BONITA WY BLVD				L.,						
STE				83							
BUN	ITA SPRINGS FL 33134			84	Cit	у		FL 85	Zip Co	ode	
					L			- 1 1	a ite ri	agistared	
office or re	enistered agent, or both, in the State 0	of Florid	da. Such change was author	izea ov	tne c	neo corpo corporation	oration submits this statement for the purpos n's board of directors. I hereby accept the a	ppointment a	ıs regi	stered	
agent. I ar	m familiar with, and accept the obligati	ions of	, Section 607.0505, Florida	Statutes	.						
SIGNATURE							when reinstation) DAT			\	
	Signature, typed or printed name of registered agent OFFICERS ANI			tered Age	nt signa	ture required	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER	_	CTOF	S IN 12	
12.	D OFFICERS AND	DIRE		1.1 TITLE			Abbinotoroto at the	☐ Cha		Addition	
NAME .	TRUDNAK, STEPHEN J		_	1.2 NAME							
				1.3 STREE	T ADDE	RESS					
	BONITA SPRINGS FL 34134	. 26.7		1.4 CITY-S							
CITY-ST-ZIP TITLE	DONNA OF TRINGO I E 04104			2.1 TITLE	71-21			☐ Cha	nge	Addition	
NAME 1				2.2 NAME							
STREET ADDRESS				2.3 STREE	T ADDE	RESS					
·				2. 4 CITY-1							
CITY-ST-ZIP TITLE	- ,			3.1 TITLE				Cha	nge _	Addition	
NAME				3.2 NAME	-					1	
STREET ADDRESS				3.3 STREE	TADOR	ess				}	
CITY-ST-ZIP				3.4. CITY-5	ST-ZiP						
TITLE				4.1 TITLE				☐ Cha	nge	Addition	
NAME			i	4. 2 NAME							
STREET ADDRESS				4.3 STREE	T ADDF	RESS					
CITY-ST-ZIP				4.4 CITY-S	ST-ZIP						
TITLE '				5.1 TITLE	·	1		☐ Cha	nge	Addition	
NAME	•			5.2 NAME			•				
STREET ADDRESS				5.3 STREE	T ADDF	RESS					
CITY-ST-ZIP		•		5.4 CITY- S	T-ZIP						
TITLE			☐ DELETE	6.1 TITLE				Cha	nge	Addition	
NAME				6.2 NAME		ŀ					
	•			63STREE	T ADDE	SESS				Ì	

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 changes or on an attachment with ap address, with all other like empowered.

SIGNATURE: