

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

FILED
Feb 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000009870 (3)**

1. Corporation Name
VIBBER, INC.

Principal Place of Business

P.O. BOX 431
LADY LAKE FL 32158

Mailing Address

206 N 3RD ST.
LEESBURG FL 34748



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/27/1995	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-3294707	Applied For ☐ Not Applicable
23 Zip	24 Country	28 Zip	29 Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
25		30		6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

JANS, RICHARD C
380 W. ALFRED STREET
TAVARES FL 32778

10. Name and Address of New Registered Agent

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	VIBBER, SALLY S	1.2 NAME	
STREET ADDRESS	PO BOX 431 N/A	1.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32158	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	VIBBER, STEVEN N	2.2 NAME	
STREET ADDRESS	PO BOX 431 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32158	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	☐ Change ☐ Addition
NAME	VIBBER, WILLIAM J	3.2 NAME	
STREET ADDRESS	PO BOX 431 N/A	3.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32158	3.4 CITY-ST-ZIP	
TITLE	ST	4.1 TITLE	☐ Change ☐ Addition
NAME	VIBBER, JOHN W	4.2 NAME	
STREET ADDRESS	PO BOX 431 N/A	4.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32158	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	JANS, RICHARD C	5.2 NAME	
STREET ADDRESS	PO BOX 1070 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	LADY LAKE FL 32778	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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.

SIGNATURE:

Sally S. Vibber

2-9-98

352-753-2859

CR2E034 (10/97)