Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90038 042 \*\*\*150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000046820

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

WARWICK NECK, INC.

VVARVVIO	N NECK, INC.							
Principal Place of Business Mailing Address							TALLA ASTAT SA	11M 11M12 MU11 1M41
18086 SAN CARLOS BLVD. 18086 SAN CARLOS BLVD.								
UNIT 821 UNIT 821						DO NOT WIRE IN TURE	SBACE	
FORT MYERS BEACH FL 33931 FORT MYERS BEACH FL 33			,81			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed 06/15/1995		
Principal Place of Business     2a. Mailing Address						4. FEI Number	$\longrightarrow$	Applied For
21 26						65-0590626		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc						5. Certifcate of Status Desired		Additional Required
22 27 City & State								
City & State City & State 28						6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country Zip Cou			ntry		8. This corporation owes the current year Into		
24	25		30			Personal Property Tax.	. Yes	No
	9. Name and Address of Curre	nt Registered Agent		27.1	<del></del> :	10. Name and Address of New Registered	Agent	<u></u>
DAY	LIC DICUADO LI		ļ	81	Name			ļ
BAYLIS, RICHARD H 18086 SAN CARLOS BLVD.				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
UNIT 821				20				
FORT MYERS BEACH FL 33931				83		·		
TOTA WILLIO DENOTITE GOSCI				84	City	FL	85 Zi	p Code
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was au	tnonzed	DV I	the corporatio	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoin	changing ntment as	its registered registered
SIGNATURE						(when reinstation) DATE		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I  OFFICERS AND DIRECTORS			13.	Agen	t signature required	ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE	D DELETE		_	1.1 TITLE		TIDDITIONG OF CONTRACT OF CONT	☐ Chang	
NAME	BAYLIS, RICHARD H		1.2 NA					
STREET ADDRESS	ACCOUNTY OF THE CONTRACT OF TH				ADDRESS			1
CITY-ST-ZIP	FORT MYERS REACH EL 20004			1.4 CITY-ST-ZIP				
TITLE	DELETE		2.1 Π				Chang	e Addition
NAME			2.2 NA	ME		,		
STREET ADDRESS			2.3 ST	REET	ADDRESS		_	
CITY-ST-ZIP			2. 4 C	2. 4 CITY-ST-ZIP				
TITLE	☐ DELETE		3.1 TIT	πE			Chang	je 🗀 Addition
NAME				3 2 NAME				
STREET ADDRESS	1		3.3 ST	REET	ADDRESS			Ì
CITY-ST-ZIP				TY-S	T-ZIP			
TITLE		☐ DELETE 4.1		πE			Chang	ge 🔲 Addition
NAME			4. 2 N	AME				
STREET ADDRESS	}		4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CI	TY-ST	r-zip			
-			5.1 TF				Chang	je 🔲 Addition
NAME	1		5.2 NA	ME				]

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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

DELETE

SIGNATURE: Author H. BAYLO Archard H. BAYLO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/99

941-466-3723 Daytime Phone #

☐ Change

Addition

R2E034 (11/98)