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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500050697

1. Corporation Name

BARTLETT & BARTLETT INCORPORATED

| Principal | Place of | Business |
|-----------|----------|----------|
| | | |

FILED Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90185 001 ***150.00



| | | | | | | 1 1840/301 HA 1940 ANN 8810 BAN 8810 ANN 8810 ANN 8810 ANN 8810 ANN 8810 ANN |
|---|---|-------------------------|-------------|--------------|---------------|--|
| Principal Plac | e of Business | Mailing Address | | | | |
| 1130 MAIN STREET FT MYERS BEACH FL 33931 1130 MAIN STREET FT MYERS BEACH FL 33931 | | | | | | |
| TT MILITO DE | 1011 1 2 33351 | I WICHO DEACH | 116 33331 | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualifed |
| | | | | | | 06/27/1995 |
| 2. Principal F | lace of Business | 2a. Mailing Addre | ess | ***** | | 4. FEI Number Applied For |
| 21 | | 26 | | | | 65-0598858 Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, | etc. | | | 5. Certificate of Status Desired \$8.75 Additional |
| 22 - | <u> </u> | 27 | | | * | |
| City & Star | le | City & State | | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | | 28 | | | | Trust Fund Contribution Added to Fees |
| Zip 24 | Country 25 | Zip 29 | 30 | Country | • | 8. This corporation owes the current year Intangible Personal Property Tax. |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Registered Agent |
| | | | | 81 | Name | |
| | TLETT, BRUCE L | | | 82 | Street A | t Address (P.O. Box Number is Not Acceptable) |
| | MAIN STREET | | | 1 | J | Criticis (1.0. Box Hallings to Hot resolution) |
| FT N | NYERS BEACH FL 33931 | | | 83 | | |
| | | | ` | 84 | City | 85 Zip Code |
| 44 5 | 4. 15 | 0 | la Chat dan | 45 | <u> </u> | FL 3 25 coo |
| office or a | egistered agent, or both, in the State | of Florida. Such chang | je was auth | norized by | the corpo | d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered |
| agent. I a | m familiar with, and accept the obligation | tions of, Section 607.0 | 505, Florid | a Statutes | • | |
| SIGNATURE | | | WOTE B | | | required when reinstating) DATE |
| 12. | Signature, typed or printed name of registered agen | D DIRECTORS | (NOTE: RE | 13. | signature re- | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | P | DE DE | LETE | 1,1 TITLE | 1 | ☐ Change ☐ Addition |
| NAME | BARTLETT, BRUCE L | | | 1.2 NAME | 1 | |
| STREET ADDRESS | 4400 BIANN OF LOT #0 | | | | ADORESS | |
| CITY-ST-ZIP | FT. MYERS FL 33931 | | | 1.4 CITY-S | ſ | |
| TITLE | V | ☐ DE | LETE | 2.1 TITLE | 1-211 | ☐ Change ☐ Addition |
| NAME | BARTLETT, DOLORES A | | | 2.2 NAME | ł | |
| STREET ADDRESS | 1130 MAIN STREET | | | 2.3 STREET | ADDRESS | } |
| CITY-SY-ZIP | FT MYERS BEACH FL 33931 | | ~ | 2. 4 CITY- 9 | 1 | The second of th |
| TITLE | 7 | □ DE | LETE | 31 TITLE | | · Change Addition |
| NAME | | | | 3.2 NAME | . | |
| STREET ADDRESS | | | | 3.3 STREET | ADDRESS | 5 |
| CITY-ST-ZIP | | | | 3.4. CITY-S | | |
| TITLE | | DE | LETE | 4.1 TITLE | - | ☐ Change ☐ Addition |
| NAME | | | | 4, 2 NAME | ĺ | |
| STREET ADDRESS | (| | | i | ADDRESS | |
| CITY-ST-ZIP | | | | 4.4 CITY-S | 1 | |
| TITLE | | □ DE | LETE | 5.1 TITLE | | Change Addition |
| NAME | | | | 5.2 NAME |] | |
| STREET ADDRESS | | | | 5.3 STREET | ADDRESS | |
| CITY-ST-ZIP | | | | 5.4 CITY-S | r-ZIP | |
| TITLE | | □ DE | LETE | 6.1 TITLE | | Change Addition |
| NAME | , | . • | | 6.2 NAME | | |
| STREET ADDRESS | | | İ | 6.3 STREET | ADDRESS | s |
| OFFICE TAPONEGO | i | | | 64 CITY-ST | - 1 | |

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.

SIGNATURE: