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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000064504 (0)

DONALD Principal Place	YERGER SEAMLESS GL	JTTERS, INC. Mailing Address							
1958 CUSTOM DRIVE 1958 CUSTOM DRIVE FORT MYERS FL 33907-2102									
						3. Date Incorporated or Qualifier 08/18/1995		Date of Last R 6/21/1996	eport
2. Principal P	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number			oplied For
21		26				65-0609761			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27	27			5. Certificate of Status Desired Section Secti			
City & Stal	e	City & State	City & State		6. Election Campaign Financing \$5.00 May Be				
23]	Country	28 7:n	Zip Country			Trust Fund Contribution Added to Fees			
Zφ			<u> </u>	n '		8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes			
24	25 29 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
GERI	HART, LINDA		8	31	Name				
1958 CUSTOM DRIVE FORT MYERS FL 33907			£	B2	Street Addre	ess (P.O. Box Number is Not Accep	able)		
run	I MITERS FL 33907		 	33					
				34	City		F	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	tes, the abo	ove L	-named corp	oration submits this statement for the	purpose	of changing it	s registered
office or r agent. La	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such change was digations of, Section 607.0505, F	authorized Ioride Statu	tes	the corporati	oration submits this statement for the on's board of directors. I hereby according to the contract of the cont	ept the a	ppointment as	registered
SIGNATURE									
12.	Signer re-typed or printed varies of registered agent and title if applicable (NOTE: I OFFICERS AND DIRECTORS			Age	nt signature require	ad when reinstating) ADDITIONS/CHANGES TO OF	DATE		20 IN 12
IFILE	D	DELETE	13.	1.1 TITLE		ADDITIONS/OFFANGES TO OF	IOLIO A	Change	Addition
NAME	GERHART, LINDA			1.2 NAME					
STREET ADDRESS	269 CAROLINA AVENUE		1.3 STREET ADDRESS		ADDRESS				
CHY-ST-ZIP	FORT MYERS BEACH FL 33	931	1.4 C(TY						
TITLE	Ď	DELETE	21 TITLE					Change	Addition
NAME	YERGER, DONALD R.		2.2 NAME						
STHEET ACORESS	4121 SABOL LANE		2.3 STREET ADDRESS		ADDRESS				
CITY - S1 - ZIF	FT MYERS FL		2.4 City-St-zip		ST-ZIP				
10.6	DELETE 3.1		3.1 TITL	3.1 TITLE				☐ Change	Addition
NAME			3.2 NAM	3.2 NAME					1
STREET ADDRESS			3.3 STRI	3.3 STREET ADDRESS					
CHY-SU-ZIP				3.4. CITY-ST-ZIP					
11 ¹ LF			ı	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADORESS			•	4.3 STREET ADDRESS					
CHY-ST-ZiF				4.4 CITY-ST-ZIP					14486
TiTLE	DELETE		1	5.1 TITLE				☐ Change	Addition
NAME			5.2 NAM						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		☐ DELETE	5.4 CITY		I-ZIP			Change	Addition
lille NAME			6.1 TiTL		}			- Clianing	L. AUGHUN
NAMÉ			6.2 NAM	#t	1				

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. If on hereby certify that the information supplied with this filling 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 15 in changed, or on an attainment with an address.

SIGNATURE:

STREET ADDRESS

CHTY+S1+ZiP

FILED

Apr 28 1997 8:00am

Secretary of State