FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT COBBOBATION



FLORIDA DEPARTMENT OF STATE Canadan D. Morthoga

ANNUA	L REPORT	DIVISIO	Secretary of S	State	4S	_			
DOCUMENT # P95000074002 (3) I. Corporation Name GEORGE WRIGHT BROKER CO.									
Principal Place of Business Muiling Address 271 PONDELLA ROAD 271 PONDELLA ROAD NORTH FT. MYERS FL 33903 NORTH FT. MYERS FL 33903									
						3. Date incorporated or Qualified 09/25/1995	3a. Da	te of Last Report	
2. Principal Plac	ce of Business	2a. Mailing Addre	ss			4. FEI Number 65-061909	4	Applied For Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt #.	etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
23 Zip	Country	Zip (29)	30	Country			. 🔲 No		
24	9. Name and Address of Curr			L		10. Name and Address of New I	Registere	d Agent	
				81	Name				
	GEORGE			82	Street Ad	ddress (P.O. Box Number is Not Acceptal	ole)		
	DELLA ROAD			83					
NORTH F	FT. MYERS FL 33903			83					
				84	City		F	B5 Zip Code	
11. Pursuant to or registere familiar wit	o the provisions of Sections 607.05 ed agent, or both, in the State of Fi h, and accept the obligations of, Si	02 and 607.1508, Florid orida: Such change was ection 607.0505, Florida	a Statutes, the authorized by Statutes.	e above the corp	named cor oration's b	poration submits this statement for the poloard of directors. I hereby accept the app	irpose of c pointment	changing its registered off as registered agent. I am	
SIGNATURE .	Signature, type Long rolled beaution registers for	पुर.1 ताला 15रू र तहक्तिला म	The History	gestaval Age	isgnatin re	pried whereign fategr	DVIE		
12.	OFFICERS ,	AND DIRECTORS		13.	- ·	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTORS IN 12 Change Addition	
TITLE	WRIGHT, GEORGE	☐ DEI	ETE	1 1 11111					
NAME	3330 NO. KEY DRIVE			1.2 NAME	1 ADORESS				
STREET ADDRESS	N. FT. MYERS FL 33903			1.4 CHY-					
CITY-ST-ZIP		DEL	ETE	2 1 THE				☐ Change ☐ Additio	
TITLE				2.2 NAME					
NAME STREET ADDRESS				2 3 STREE	T ADDRESS				
City-St-ZiP				2 4 CHY-	ST-ZIF			Change Addition	
TITLE		DEC	ETE	3 1 T:TLE				Change C Addition	
NAME				3.2 NAME					
STREET ADDRESS				1	ET ADDRESS				
CITY - ST - ZIP			C C	3.4 CITY -				☐ Change ☐ Addition	
TITLE		DEI	LLIE	4 1 11:EE				-	
NAME					ELADORESS				
STHEET ADDRESS				4.4 C-TY					
CITY-ST-ZIP			LFIE	5 1111				Change Addition	
TITLE				5 2 NAM					
NAME				•	ET ADDRESS				

6.4 CITY - \$1 - 7IP 14. If do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 it 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 or an attachment with an address

5.4 CITY S1-7IP

63 STREET ADDRESS

6 1 TiT.E

6.2 NAME

SIGNATURE: ___

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAMÉ

SIGNATURE AND TYPED OR PRINTED TIME OF SIGNING OFFICER OF PRIECTOR

DELETE

Pres 4-22-96 941-997-3991

☐ Change ☐ Addition

CR2E034 (12/95)