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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Block 12 or Block 13 if changed, or



FLORIDA DEPARTMENT OF STATE

FILED

Mar 26 1998 8:00am

Secretary of State

Change

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000084306 (6)

DAWN L. LOVELL, INC. Principal Place of Business Mailing Address 1640 PERIWINKLE WAY 1640 PERIWINKLE WAY DO NOT WRITE IN THIS SPACE SANIBEL FL 33957 SANIBEL FL 33957 3. Date Incorporated or Qualified 10/30/1995 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LOVELL, DAWN 1640 PERIWINKLE WAY STE 2 83 SANIBEL FL 33957 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ DELETE TITLE 1.1 TITLE NAME LOVELL. DAWN 1.2 NAME STREET ADORESS 1640 PERIWINKLE WAY STE 2 1.3 STREET ADDRESS SANIBEL FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE ☐ Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 300002470149 5.1 TITLE Addition -03/27/98--01010--033 NAME 5.2 NAME ***150.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

DELETE

an address

6.1 TITLE 62 NAME

6.3 STREET ADDRESS

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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in March 9, 1998

Florida Division of Corporations P. O. Box 1500 Tallahassee, FL 32302-1500

Re: Dawn Lovell, Inc. 65-6188501

To Whom It May Concern:

Please find enclosed a copy of correspondence from the Internal Revenue Service. I spoke with your office at the beginning of 1997, and somehow, my corporate name was duplicated when filed back in October of 1996. To further confuse the situation, the other corporation was nonprofit. So, the name was changed to present Language. This change went in everywhere and I was notified by the IRS, I did not have a tax number, so they issued my another one (see enclosed notice). I did contact them and they said the number needed changed anyway because the original, above referenced number was a not for profit corporate number.

Please let me know it I need to do anything special with you to change the number.

Thank you,

Dawn L. Lovell

Description of Transport Coronado Parkway

Cape Coral, FL 33904

enclosure

See Hem 4

650739419 ZT 00 0000 R31855 9723 5901

07963-520-00024-7

37627 209

Department of the Treasury Internal Revenue Service ATLANTA, GA 39901

Date of this notice: Taxpayer identifying Number Form: 2363 JUNE 16, 1997

65-0739419

Tax Period:

For assistance you may call us at:

354-1760 LOCAL JAX -1-800-829-1040

Or you may write to us at the address shown at the left. If you write, be sure to attach the bottom part of this notice.

DAWN L LOVELL INC PO BOX 701301 ST CLOUD FL 34770-1301013

EIN ASSIGNED IN ERROR

OUR RECORDS INDICATE WE HAVE INCORRECTLY ASSIGNED MORE THAN ONE EMPLOYER IDENTIFICATION NUMBER TO YOU. THE NUMBER SHOWN ABOVE IS YOUR CORRECT ONE. THE FOLLOWING NUMBER HAS BEEN INCORRECTLY ASSIGNED:

65-6188501

WE WILL TRANSFER ANY PAYMENTS OR RETURNS TO YOUR ACCOUNT UNDER THE CORRECT EMPLOYER IDENTIFICATION NUMBER.

PLEASE USE THE CORRECT NUMBER AND ACCOUNT NAME, EXACTLY AS SHOWN ABOVE, ON BUSINESS TAX RETURNS, PAYMENTS, PAYMENTS MADE ELECTRONICALLY, AND RELATED CORRESPONDENCE.

PLEASE DESTROY ANY FEDERAL TAX DEPOSIT COUPON BOOKS WHICH SHOW THE INCORRECT EMPLOYER IDENTIFICATION NUMBER.

IF YOU DEPOSIT ELECTRONICALLY, PLEASE VERIFY THAT YOUR EIN IS CORRECT BEFORE MAKING YOUR DEPOSIT THROUGH THE FINANCIAL INSTITUTION DESIGNATED TO PROCESS YOUR ELECTRONIC FUNDS TRANSFER (EFT) TAX PAYMENTS.

WE APOLOGIZE FOR ANY INCONVENIENCE WE MAY HAVE CAUSED YOU, AND THANK YOU FOR YOUR COOPERATION.