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FILED
Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000001196 (0)

1. Corporation Name:
METHENY & ISLEY, P.A.



Principal Place of Business

1635 HENDRY STREET
FORT MYERS FL 33901-4

Mailing Address

1635 HENDRY STREET
FORT MYERS FL 33901-2909

2. Principal Place of Business

21 2138 McGREGOR BLVD.
State, Apt. #, etc.

22 City & State

23 FORT MYERS, FL
Zip Country

24 33901 25 US

2a. Mailing Address

26 2138 McGREGOR BLVD
Suite, Apt. #, etc.

27 City & State

28 FORT MYERS, FL
Zip Country

29 33901 30 US

3. Date Incorporated or Qualified

01/01/1996

3a. Date of Last Report

4. FEI Number

65-0632497

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

METHENY, MARVIN L C.P.A.
1635 HENDRY STREET
FORT MYERS FL 33901-4

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2138 McGREGOR BLVD.

83

84 City FORT MYERS, FL

FL

85 Zip Code 33901

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

(If the corporation is a partnership, the signature of the partner designated as agent is required.)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME METHENY, MARVIN L C.P.A.
STREET ADDRESS 1635 HENDRY STREET
CITY-STATE-ZIP FORT MYERS FL 33901-4

TITLE D
NAME ISLEY, R. DAVID C.P.A.
STREET ADDRESS 1635 HENDRY STREET
CITY-STATE-ZIP FORT MYERS FL 33901-4

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

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NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS 2138 McGregor Blvd.
14 CITY-STATE-ZIP Fort Myers, FL 33901

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS 2138 McGregor Blvd.
24 CITY-STATE-ZIP Fort Myers, FL 33901

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

14. I do 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.

SIGNATURE: R. DAVID ISLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/97 (941)337-3733

0386532

CR2E034 (9/96)