

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

FILED

May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000014767 (3)**

1. Corporation Name

SAN CARLOS PROPERTY RENTALS INC.

Principal Place of Business

**17410 W CARNEGIE CIRCLE
FORT MYERS FL 33912**

Mailing Address

**17410 W CARNEGIE CIRCLE
FORT MYERS FL 33912**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified

02/16/1986

4. FEI Number

65-0638005

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**WINSLOW, URBAN C
17410 W CARNEGIE CIRCLE
FORT MYERS FL 33912**

10. Name and Address of New Registered Agent

81 Name **MENARD, RONALD A.**

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

83 **17410 W CARNEGIE CIRCLE**

84 City

Ft. Myers,

FL

85 Zip Code

33912

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, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

RONALD A. MENARD

(NOTE: Registered Agent signature required when reinstating)

DATE

4-21-98

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MURIEL MENARD
STREET ADDRESS	18147 CUTLASS DR
CITY-ST-ZIP	FT MYERS BCH FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MENARD, MELANIE S
STREET ADDRESS	17410 WEST CARNEGIE
CITY-ST-ZIP	FORT MYERS FL 33912
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MENARD RONALD A
1.3 STREET ADDRESS	17410 W CARNEGIE CIRCLE
1.4 CITY-ST-ZIP	FT. MYERS, FL 33912
2.1 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MENARD, RONALD A
2.3 STREET ADDRESS	17410 W CARNEGIE CIRCLE
2.4 CITY-ST-ZIP	FT. MYERS, FL 33912
3.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MENARD, RONALD A
3.3 STREET ADDRESS	17410 W CARNEGIE CIRCLE
3.4 CITY-ST-ZIP	FT MYERS, FL 33912
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 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 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:

RONALD A. MENARD

CR2E034 (10/97)