1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000031990

1. Corporation Name

GERMAIN IMPORTS OF NAPLES, INC.

Principal Place of Business	M

## Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90120 027 \*\*\*150.00



ailing Address 13315 NORTH TAMIAMI TRAIL 13315 NORTH TAMIAMI TRAIL NAPLES FL 33963 NAPLES FL 33963 DO NOT WRITE IN THIS SPACE 3. Date Ir corporated or Qualifed 04/08/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 13315 N. Tamiari 26 13315 N. Jamiami Irail 65-0665379 Not Applicable \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 Çity & State City & S ate 6. Election Campaign Financing \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees Country Country 8. This corporation owes the current year Intangible ΠNo Personal Property Tax. 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KOBZA, KIM P Street Acdress (P.O. Box Number is Not Acceptable) 4001 NORTH TAMIAMI TRAIL #330 NAPLES FL 33940 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statures, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or bolh, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed na ne of registered agent and title if applicable (NOT :: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE 11 TITLE TITLE obert L. Germain, Sr. GERMAIN, ROBERT L SR 12 NAME NAME 13315 NORTH TAMIAMI TRAIL 13329 N Tamiami 1.3 STREET ADDRESS STREET ADDRESS 34110 lapies, E V, D, S NAPLES FL 33963 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE Change
Ch 2 1 TITLE TITLE Robert L. Germain Jr. 13315 N. Tamiami Trail Naples, FL 34110 V. D. T. S GERMAIN. ROBERT L JR 2.2 NAME NAME 13315 NORTH TAMIAMI TRAIL 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33963 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition **Change** ☐ DELETE 3.1 TITLE TITLE Stephen L. Germain Bl.d. GERMAIN, STEPHEN MR 3.2 NAME NAME 5777 SCARBOROUGH BOULEVARD STREET ADDRESS 3.3 STREET ADDRESS Dlumbus OH COLUMBUS OH 43232 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE 4. 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 51 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 attact ment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED FINITED NAME OF SIGNING OFFICE OR DIRECTOR

CR2E034 (11/98)