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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000053498

1. Corporation Name

PETERSON ENTERPRISES, INC.

Principal Place of Business

13200 SOUTHAMPTON DR
BONITA SPRINGS FL 34135
US

Mailing Address

13200 SOUTHAMPTON DRIVE
BONITA SPRINGS FL 34135
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/21/1996

4. FEI Number

59-3439189

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 1745 WINDING OAKS WY
Suite, Apt. #, etc.

2a. Mailing Address

26 1745 WINDING OAKS WY
Suite, Apt. #, etc.

City & State

23 NAPLES FL

City & State

28 NAPLES FL

Zip Country

24 34109 25 COLLIER

Zip Country

29 34109 30

9. Name and Address of Current Registered Agent

PETERSON, ROGER B
13200 SOUTHAMPTON DRIVE
BONITA SPRINGS FL 34135

10. Name and Address of New Registered Agent

81 Name PETERSON, ROGER B
82 Street Address (P.O. Box Number is Not Acceptable)
1745 WINDING OAKS WAY
83
84 City NAPLES FL 85 Zip Code 34109

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 *Roger B. Peterson* ROGER B. PETERSON, Reg. Agent President 1/14/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DPT	PETERSON, ROGER B	13200 SOUTHAMPTON DR	BONITA SPRINGS FL 34135	<input checked="" type="checkbox"/>
DVS	PETERSON, DEBORAH A	13200 SOUTHAMPTON DR	BONITA SPRINGS FL 34135	<input checked="" type="checkbox"/>
D	FOWELL, DONALD L.	125 CARIBBEAN RD	NAPLES FL 34108	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
DPT	PETERSON, ROGER B	1745 WINDING OAKS WAY	NAPLES FL 34109	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DVS	PETERSON, DEBORAH A	1745 WINDING OAKS WAY	NAPLES FL 34109	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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, with all other like empowered.

SIGNATURE: *Deborah A. Peterson* DEBORAH A. PETERSON Vice President 1/14/99 941-450-1107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)