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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 👎

FILED

Apr 28 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000057054 (4)

Lam an officer or director of the corporation appears in Block 12 or Block 13 if changed

SIGNATURE:

SECURITY TITLE SERVICES OF LEE COUNTY, INC.

1853 VICTORIA AVENUE FORT MYERS FL 33901		1853 VICTORIA AVENUE FORT MYERS FL 33901-3428			
				3. Date Incorporated or Qualified 07/03/1996	3a. Date of Last Report
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26			Net Applicable
Suite Apt.	#. etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2		27		or octamound of oracles bosined	Fee Required
City & State	2	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28	Country	Trust Fund Contribution	Added to Fees
- <i>შ</i> ან შ	Country	Zip	Country	8. This corporation has tiability for in Florida Statutes	ntangible tax under s. 199.032, Yes D No
1	25 9. Name and Address of Curre		30	10. Name and Address of New Reg	
DADO		III Hogistores Agent	81 Name		
	SONS, WADE H ESQUIRE S VICTORIA AVENUE				
	T MYERS FL 33901		82 Street Add	Iress (P.O. Box Number is Not Acceptable	le)
FUR	I MTERS PL 33801		83		
			64 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statute	es the above-named cor	poration submits this statement for the pr	urpose of changing its registered
office or re	egistered agent, or both, in the Stat	e of Florida. Such change was a	uthorized by the corpora	poration submits this statement for the pration's board of directors. I hereby accept	t the appointment as registered
agent. La	m familiar with, and accept the oblig	gations of, Section 607,0505, Fig.	Statutes.	4/0	167
SIGNATURE	Signature, typicid or printed name of registered as	non and title if applicable (NOTE	Registered Agent signature requ	yired warn reinstaling)	DATE
<u>``</u>	1 m s	ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TLE	DDES/DE/07	T DELETE	1.1 TITLE		Change Addition
			1.1 1114.0		Li ovango Li vacano
	WADE H DARSO.	US	1.2 NAME		
IAME	WADE H. PARSO.	US BOEDUE	1.2 NAME		
IAME STREET ADORESS	WADE H. PARSO.	US BOENUE	1.2 NAME 1.3 STREET ADDRESS		onengo realist
IAME Jeel Ladoress City-St-Zip	WADE H. PARSO. 1853 VICTORIA, FORT MYEPS, FL	US BOENUE	1.2 NAME		
IAME STREET ADORESS CITY-ST-ZIP HTLE	WADE H. PARSO.	US AOENUE -33901	1.2 NAME 1.3 Street Address 1.4 City-St-Zip		
NAME STREET ADORESS CITY - ST - ZIP HTLE NAME	WADE H. PARSO.	US AOENUE -33901	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		
IAME THEFT ADDRESS OITY-ST-ZIP THEE NAME STREET ADDRESS	WADE H. PARSO.	US AOENUE -33901	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		
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