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FILED  
Apr 24 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000095055 (5)

1. Corporation Name  
YAWNOC, INC.



Principal Place of Business

Mailing Address

1342 COLONIAL BLVD., SUITE E-34  
FT. MYERS FL 33907

1342 COLONIAL BLVD., SUITE E-34  
FT. MYERS FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/11/1996

2. Principal Place of Business

2a. Mailing Address

21 14895 SOARING EAGLE CT.  
Suite, Apt. #, etc.

26 14895 SOARING EAGLE CT.  
Suite, Apt. #, etc.

4. FEI Number

65-0712055

Applied For

Not Applicable

22

City & State

27

City & State

23 FT. MYERS, FL.  
Zip Country

28 FT. MYERS, FL.  
Zip Country

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

24 33912

25 USA

29 33912

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BREMBT, RONALD  
1342 COLONIAL BLVD  
SUITE F46  
FT MYERS FL 33907

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS CONWAY, JAMES C  
CITY-ST-ZIP 14895 SOARING EAGLE CT -  
FT MYERS FL

1.1 TITLE ☒ Change ☒ Addition  
1.2 NAME  
1.3 STREET ADDRESS 14895 SOARING EAGLE CT.  
1.4 CITY-ST-ZIP 33912

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS BULLINGTON-CONWAY, JILL A  
CITY-ST-ZIP 14895 SOARING EAGLE CT  
FT MYERS FL

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP 33912

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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.

CR2E034 (10/97)