FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT CORPORATION ANNUAL REPORT

1997



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000102192 (7)

NAMCO OF SOUTHWEST FLORIDA, INC.

			····					
Principal Plac		•	Mailing Address					irra dissi radi
6841 DABNEY ST FT MYERS FL 33912		P O BOX 61824 FT MYERS FL 33906-1824	P O BOX 61824 FT MYERS FL 33906-1824					
					3. Date incorporated or Qualified 12/17/1996	3a. Date	of Las	t Report
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			65-0714405			Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75		5 Additional	
22		27			5. Certificate of Status Desired	 	Fee	Required
City & State		City & State	<u>├</u>		6. Election Campaign Financing \$5,00 May E			
Zip	Country		Countr		Trust Fund Contribution			od to Fees
24	25	├ - -¬	30	у	This corporation has liability for Florida Statutes		ax unde N o	rs. 199.032,
	9. Name and Address of Cur		30		10. Name and Address of New Re			
HEIS	ST, H. ANTHONY		81	Name				
	ESTERO BLVD		82	Street	Address (P.O. Box Number is Not Acceptate			
	E 20		02	3116017	6841 DAGNES ST			
	AYERS FL 33932		83			1E 3 1	vun	
1			84	City			05 7	ıp Code
		•			FT. MYONS	FL	'	3 25)
11, Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	s, the abov	e-named	corporation submits this statement for the poration's board of directors. I hereby accel	urpose of c	hanging	j its registered
agent. La	im fanillar with, and accepathe of	Tigations of, Section 607,0505, Flor	rice Statute	is. /_/	porations board dydirectors, Thereby accep	л пое аррог	nanena	tre registeren
SIGNATURE	xi) Why was		1 can	JΛ	fred 4-0	9-9	7	
	Signature, typed or printed runto of registered			ont lightture	required when reinstaling)	DATE		
12.		DELETE	13.	т	ADDITIONS/CHANGES TO OFFIC		Ohang	
TITLE	D D	□ percie	1.1 TITLE 1.2 NAME			Ł.		E MODINOR
NAME OTOCCY ADDOCCO	ERICKSON, KENNETH 6841 DABNEY ST		1.3 STREET ADDRESS					
STREET ADDRESS	FT MYERS FL 33912		1.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	D D	☐ DELETE	2.1 TITLE				Chang	e Addition
NAME	WAYLAND, TERRY		2.2 NAME					, Ell rice iller
STREET ADDRESS	4665 DELEON ST 268		2.3 STREET ADDRESS					
CITY-ST-ZIP	FT MYERS FL 33907		2.4 Cily-					
TITLE		DELETE	3.1 TITLE				Chang	e Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	1 ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE		☐ DELETE	4 1 TITLE				Chang	e 🔲 Addition
NAME			4. 2 NAME	·				
STREET ADDRESS	1			t address				
CITY-ST-ZIP			4.4 CI1 9-	S1 - ZiP				<u>.</u>
TITLE		☐ DELETE	5.1 TITLE			L	Chang	e Addition
NAME			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		T Britte	5 4 CITY-	ST - 7IP			T Charac	
TITLE		☐ DELETE	6.1 TITLE	ł		£.	Chang	e [_] Addition
NAME			6.2 NAME	1 1000000				
STREET ADDRESS			L	T ADDRESS				
CITY-ST-ZIP	by certify that the information supr	blied with this filling does not qualify	6.4 CiTy -		tated in Section 119.07(3)(i), Florida Statute	s. I further o	certify th	at the
Informatio	on indicated on this annual report in ifficer or director of the corporation	or supplemental annual report is tri	ue and acc ered to exe	urate and	that my signature shall have the same lega eport as required by Chapter 607, Florida S	il effect as il	f made i I that m	under oath; that

4-29-97

C741) 277-2591

FILED

Jun 12 1997 8:00am

Secretary of State