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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000103826 (9)

A CLASS ACT, INC.

Principal Place of Business	Mailing Address
4827 MILTON STREET	4827 MILTON STREET
CAPE CORAL FL 33904	CAPE CORAL FL 33904

FILED May 19 1998 8:00am Secretary of State



4002 BILTON	_	4827 MILTON STREET					
4827 MILTON STREET CAPE CORAL FL 33904		CAPE CORAL FL 33904					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					01/01/1997		
	ace of Business	2a. Mailing Address	15		4. FEI Number Applied For		
21 482	7 MILTON ST.	26 SAME			65-0737394 Not Applicable		
Suite, Apt. :	NA	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	E CORAL	City & State FLOR	IDA		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24 339	04 Country	Z(p) 30	Country	′	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
SM	ITH, WILLIAM R		81	Name			
8191 COLLEGE PARKWAY STE 300			82	82 Street Address (P.O. Box Number is Not Acceptable)			
FOI	RT MYERS FL 23919		83		,		
 			84	City	FL 85 Zip Code		
44 Purcuant I	to the provisions of Sections 807 (15)	2 and 607 1508 Florida Statules	the show	o-named			
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.							
agent. Lar			a Statute:	S. CAALG	(DOEKINGAT) Ulislaa		
SIGNATURE	Signature: typied or printed name of registered are	ace LORI		OOLE	required when reinslating) DATE		
12.	OF FICE HS AN		13.	.iii bigilatari	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition		
NAME	O'TOOLE, LORI	-	1.2 NAME				
STREET ADDRESS	5101 GLADE COURT	!	1.3 STREET	ADORESS			
CITY-ST-ZIP	CAPE CORAL FL 33904		1.4 GJTY - S				
TITLE	0	DELETE	2.1 TITLE		☐ Change ☐ Addilion		
NAME	O'TOOLE, JOHN D JR		2.2 NAME				
STREET ADDRESS	5101 GLADE COURT	,	2.3 STREET	ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL 33904		2. 4 CITY-				
TITLE		DELETE	3.1 TITLE		Change Addition		
NAME		•	3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS	<u> </u>		
CITY-ST-ZIP			3.4. €ITY -		·		
TITLE		DELETE	4.1 1/TLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S				
TITLE		☐ DELETE	5.1 TITLE		Change Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S				
TITLE		DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ACIDRESS			
CITY-ST-ZIP			6.4 CITY-S				
	self, that the information consoling or	ith this filing does not qualify for			ed in Section 119.07(3)(i), Florida Statutes, I further certify that the information		

r nereby certify trial the information supplied with this laining does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Further certify that the information indicated on this annual report or suppliemental 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 or an attachment with an address.

543–8483 4/14/98