FILED

Apr 29, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000104126

1. Corporation Name

ANGLER SOUTH, INC.

Principal Place of Business Mailing Address 11307 PERICO ISLES CIRCLE 11307 PERICO ISLES CIRCLE **BRADENTON FL 34209 BRADENTON FL 34209** DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualifed 12/30/1996 2a. Mailing Address Applied For. 2. Principal Place of Business 4. FEI Number P.O BOX 1みみ/ 515 South 65-0757021-Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Anna Maria Trust Fund Contribution Added to Fees HAAA 28 23 Zip Country 8. This corporation owes the current year Intangible 30 Maratee 24 3421 34216 Manutee Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name 5 hubal 7 homus SHUBAT, THOMAS Street Address (P.O. Box Number is Not Acceptable) 82 11307 PERICO ISLES CIRCLE **BRADENTON FL 34209** ろり Code 392/6 84 City Anna Maria 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. Jhuba reinstating) (NOTE: Registered Agent signature registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Addition П Сһалде TITLE DELETE 1.1 TITLE SHUBAT, THOMAS 1.2 NAME NAME 11307 PERICO ISLES CIRCLE 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIF CITY-ST-ZIP Change Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP

6.4 CITY-ST-ZIP CITY-ST-ZIP 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

DELETE

□ DELETE

☐ Change

☐ Change

☐ Change

☐ Addition

Addition

☐ Addition

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