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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700

P9700001040 (9)

A.G. ARTISTRY, INC.

FILED May 19 1998 8:00am Secretary of State

ייטי או	mom, mo			
Principal Place	e of Business	Mailing Address		
		· ·		
6001 TAYLOR ROAD NAPLES FL 34109-1634		6001 TAYLOR ROAD NAPLES FL 34109-1834		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
9 Principal P	lane of Business	2a. Mailing Address		01/06/1997
21 1510	Rail Head Blud.		cad Blud	4. El Number Applied For Not Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	WAS PLAC	\$9.75 Additional
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27		5. Certificate of Status Desired Fee Regulred
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23 11		28 NAples,	<u> </u>	Trust Fund Contribution Added to Fees
Zip Country		Zip	Country	8. This corporation owes or has paid the current year Intangible
24 541		29 39110 3	o US	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
RILEY, THOMAS S III				
6001 TAYLOR ROAD			82 Street	Address (P.Q. Box Number is Not Acceptable)
NAPLES FL 34109-1834			83 15 16	O Rail Hego Blud.
-			63	
			B4 City	Aples, 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 vista, and accept the original part of the original par				
agent. Lam familiar with, and accept the officiations of Seoft) 197.0505, Florida Statutes.				
SIGNATURE Signature typed or protect rated of region of disproporation that depole able (NOTI: Registered Agent signature required which reinstating) DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	VP. Change Maddition
NAME	RILEY, THOMAS S III		1.2 NAME	
STREET ADDRESS	6001 TAYLOR ROAD		1.3 STREET ADDRESS	1510 Rail Head Blup.
CITY-ST-ZIP	NAPLES FL 34109-1834		1.4 C(TY - ST - ZIP	NAPLES, FL 34110
TITLE	D	DELETE	2.1 TITLE	P.
NAME	POMEROY, JOHN R		2.2 NAME	
STREET ADDRESS	5940 SW 14TH STREET		2.3 STREET ADDRESS	
CITY-\$T-ZIP	NAPLES FL 33999		2, 4 CITY-ST-ZIP	NAPICS, FL 34116
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP		- Actor	3 4. CITY - ST - ZIP	Tours Taxon
TITLE		☐ DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME			4 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP	Change Addition
TITLE		L DELCIE	5.1 TITLE	☐ CHaille ☐ Montion
NAME STREET ADDRESS			5.2 NAME	
STREET ADDRESS CITY-ST-ZIP		ĺ	5.3 STREET ADDRESS	
TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	Change Addition
NAME			6.2 NAME	C Change C Hounter
STREET ADDRESS			6.3 STREET ADORESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
	ertify that the information supplied with	this filing does not quality for t		od in Section 119.07(3)(i), Florida Statutes. I further certify that the information

4. I bereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I 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 popula attachment with an address.

CICNIATURE.

A TOWN

LOHN R. POMER

MERNY - POEC - 4.14.05

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