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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 06 1998 8:00 am Secretary of State

DOCUMENT #	P97000022524	(7)
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ARNOLD ASSOCIATES SOUTHWEST FLORIDA, INC.

Principal Place of Business Mailing Address				4 188 (188) to seen 1884 8834 seem 6841 8841 11818 11818 4181 (881
	2915 COLONIAL BLVD SUITE 200 2915 COLONIAL BLVD SUITE 200 FT. MYERS FL 33919 FT. MYERS FL 33919			
11. 41.210	L 99910	FI. MILIO FE ODDIO		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
6 Dringing (Place of Divisions	Ter Maine Andreas		03/12/1997 4. FEI Number. Applied For
2. Principal Place of Business 2a. Mailing Address			FA - 7013 5 C X X	
Suite, Apt.	#. atc.	26		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	le	City & State		Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 25 Name and Address of Curre	29	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
AD			81 Name	10. Hallo alla Nadioda di Non Hogiato da Agolit
	Arnold, lee e jr. 121 No rth Osceola ave.			/DO Doubles to New Associable)
	CLEARWATER FL 34615			ddress (P.O. Box Number is Not Acceptable)
~	EMINITERITE OTOTO		83	
			84 City	■■ 85 Zip Code
			O4 City	FL s z p code
office or i agent. I a SIGNATURE	registered agent, or both, in the Stat am familiar with, and accept the obli- Signature typed or preved name of registered a	gations of, Section 607.0505	as authorized by the corpo Florida Statutes. NOTE: Registered Agent signature re	ration's board of directors. I hereby accept the appointment as registered
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	ARNOLD, LEE E JR.		1.2 NAME	
STREET ADDRESS	121 NORTH OSCEOLA AVE.		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	Plesident	33722	1.4 CITY-ST-ZIP 2.1 TITLE	☐ Change ☐ Addition
NAME	huffer Pat	בן אניניונ	2.2 NAME	Change Z Addition
STREET ADDRESS	41 wermonth Dri	've	2.3 STREET ADDRESS	
CITY+ST-ZIP	clearwater Fl.	34624	2 4 CITY-SI-ZIP	
TITLE	,	DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - S1 - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-\$1-ZIP		DELETE	4.4 CITY+ST-ZIP 5.1 TITLE	Change Addition
NAME		_ vector	5.2 NAME	TC Thomas
STREET ADDRESS			5.3 STREET ADDRESS	67
CITY-ST-ZIP			5.4 City-St-Zip	7.7
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	2000025841 5 2 -07/03/3801032046
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	L <u>.</u>		6.4 CITY: ST-ZIP	***150.00
indicated officer or	certify that the information supplied on this annual report or appliemen director of the corporation or the or Block 13 if changed or or an att	tal annual report is true and ceiver or trustee annual ered	y for the exemption stated accurate and that my signa to execute this report as re	in Section 119.07(3)(i). Florida Statutes. I further certify that the information after shall have the same legal effect as if made under cath; that I am an equired by Chapter 607, Florida Statutes; and that my name appears in

4/20/98 813-442-2184