

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

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90129 022 ***150.00

0449526

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000027524

1. Corporation Name

WM. FRANK FUTCH, INC.

Principal Place of Business

2744 E EDISON AVE
FT MYERS FL 33916

Mailing Address

2744 E EDISON AVE
FT MYERS FL 33916

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1997

4. FEI Number
65-0741167

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 2207 S.W. 52nd St.

2a. Mailing Address

26 2207 S.W. 52nd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Cape Coral, FL

City & State

28 Cape Coral, FL

Zip

24 33914

Country

25 USA

Zip

29 33914

Country

30 USA

9. Name and Address of Current Registered Agent

FUTCH, WM. FRANK
2744 E EDISON AVE
FT MYERS FL 33916

10. Name and Address of New Registered Agent

81 Name

Wm. Frank Futch

82 Street Address (P.O. Box Number is Not Acceptable)

2207 S.W. 52nd Street

83

84 City

Cape Coral

FL

85 Zip Code

33914

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.

SIGNATURE

Wm. Frank Futch

(NOTE: Registered Agent signature required when reinstating)

DATE

2-15-99

Signature, type or printed name of registered agent and title if applicable.

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME DPST
STREET ADDRESS FUTCH, WM. FRANK
CITY-ST-ZIP 2744 E EDISON AVE
FT MYERS FL 33916

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

DPST
FUTCH, Wm. Frank
2207 S.W. 52nd Street
Cape Coral, FL 33914

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. 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.

SIGNATURE:

Wm. Frank Futch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-99 (941) 542-7755

Date

Daytime Phone #

CR2E034 (1/98)