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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052508 (3)

DESIGN CONSTRUCTION CONSULTANTS OF FT. MYERS, IN

Principal Place of Business 14520 DORY LANE

GNATURE:

Mailing Address

FILED May 08 1998 8:00am Secretary of State



14520 DORY LANE FT. MYERS FL 33908 FT. MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/13/1997</u> Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation owes or has paid the current year Intangible ✓ Yes 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DEROUEN, SHELLY A 1953 COLONIAL BLVD. Street Address (P.O. Box Number is Not Acceptable) FT. MYERS FL 33907 63 84 City 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 with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) 1097 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE mu 1.1 TITLE Change MAKE WILLOUGHBY, JOSEPH 1.2 NAME STREET ADDRESS 14520 DORY LANE 1.3 STREET ADDRESS FT. MYERS FL 33908 CITY-ST-ZW 1.4 CITY+ST-ZIP DELETE Change Addition TITLE 21 TITLE WILLOUGHBY, JONI NAME 2.2 NAME 14520 DORY LANE STREET ADDRESS 2.3 STREET ADDRESS FT. MYERS FL 33908 MY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4. 2 NAME DEET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME MARKS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP ZP □ DELETE 6.1 TITLE Addition 62 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 upplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address. hereby certify that the information officer or director of the corpor Slock 12 or Block 13 if change