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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000063529 1. Corporation Name MILLS ASSOCIATES OF SOUTHWEST FLORIDA, INC.					
Principal Place of Business 200 S. ORANGE AVE. SARASOTA FL 34236			Mailing Address 200 S. ORANGE AVE. SARASOTA FL 34236		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 1858 Ringling Blvd. Suite, Apt. #, etc.		2a. Mailing Address 26 1858 Ringling Blvd. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/21/1997	
22 City & State Sarasota, FL		27 City & State Sarasota, FL		4. FEI Number 65-0790212	
23 Zip 34236		28 Country Sarasota		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Zip 34236		29 Country Sarasota		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent DIETZ, GEORGE A 200 S. ORANGE AVE. SARASOTA FL 34236			10. Name and Address of New Registered Agent 81 Name Dieter Gebhard 82 Street Address (P.O. Box Number is Not Acceptable) 635 S. Orange Ave. 83 Suite 10 84 City Sarasota FL 85 Zip Code 34236		
11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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: <i>[Signature]</i> DATE: 4/5/99					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)