

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

FILED
Apr 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000067573 (0)

1. Corporation Name
PERENNIALS, INC.



Principal Place of Business

1853 VICTORIA AVE.
FT. MYERS FL 33901

Mailing Address

1853 VICTORIA AVE.
FT. MYERS FL 33901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/04/1997

4. FEI Number

65-0775621

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 or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 7051 CRYSTAL DRIVE
Suite, Apt. #, etc.

22

City & State

23 Fort Myers, Florida
Zip Country

24 33907

25 WA

2a. Mailing Address

26 7051 CRYSTAL DRIVE
Suite, Apt. #, etc.

27

City & State

28 Fort Myers, Florida
Zip Country

29 33907

30 USA

9. Name and Address of Current Registered Agent

ANDRASIK, BARBARA E
7051 CRYSTAL DR.
FT. MYERS FL 33907

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 type and print name of the registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PS
ELLIS, GERALDINE
1853 VICTORIA AVE.
FT. MYERS FL 33901

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VT
ANDRASIK, BARBARA E
1853 VICTORIA AVE.
FT. MYERS FL 33901

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

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

7051 CRYSTAL DR.
FT. MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

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

7051 CRYSTAL DR.
FT. MYERS, FL 33907

☒ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ 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

SIGNATURE

Barbara E. Andrasik

4/13/98 (000) 255 0835

CR2E034 (10/97)