

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90030 029 \*\*\*150.00

DOCUMENT # P97000077311

1. Corporation Name

NAVICO, INC.

Principal Place of Business

11701 SOUTH BELCHER ROAD  
SUITE 128  
LARGO FL 33773

Mailing Address

11701 SOUTH BELCHER ROAD  
SUITE 128  
LARGO FL 33773

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1997

4. FEI Number

59-2886590

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 19210 33rd Ave W.

Suite, Apt. #, etc.

22 Suite A

City & State

23 Lynnwood, WA

Zip

24 98036

Country

25 USA

2a. Mailing Address

26 19210 33rd Ave W.

Suite, Apt. #, etc.

27 Suite A

City & State

28 Lynnwood, WA

Zip

29 98036

Country

30 USA

9. Name and Address of Current Registered Agent

LARSON, H. WILLIAM ESQ.  
7381 114TH AVENUE NORTH  
SUITE 406  
LARGO FL 33773

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☒ DELETE

TITLE D  
NAME FLYNN, JAMES  
STREET ADDRESS HILDERSHAM BARN, HIGH STREET, ST. PETERS  
CITY-ST-ZIP BROADSTARIS, KENT CT10 1SZ

TITLE D  
NAME WRIGLEY, ALAN  
STREET ADDRESS BEACON COTTAGE, TRINITY SQ. READING ST.  
CITY-ST-ZIP BROADSTARIS, KENT CT10 1SZ

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 President ☒ Change ☒ Addition  
1.2 NAME Brian staton  
1.3 STREET ADDRESS 19210 33rd Ave W., Suite A  
1.4 CITY-ST-ZIP Lynnwood, WA 98036

2.1 TITLE Secretary/Treasurer ☐ Change ☒ Addition  
2.2 NAME Gary Marvin  
2.3 STREET ADDRESS 19210 33rd Ave W., Suite A  
2.4 CITY-ST-ZIP Lynnwood, WA 98036

3.1 TITLE vp ☐ Change ☒ Addition  
3.2 NAME Bruce Trimble  
3.3 STREET ADDRESS 19210 33rd Ave W., Suite A  
3.4 CITY-ST-ZIP Lynnwood, WA 98036

4.1 TITLE General Counsel ☐ Change ☒ Addition  
4.2 NAME Michael Schwartz  
4.3 STREET ADDRESS 400 South Hwy 169, Suite 110  
4.4 CITY-ST-ZIP Minneapolis, MN 55436

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

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

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 (1/198)