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

DOCUMENT # P97000088537

KUZMA PROPERTIES INC.

Principal Place of Business

Mailing Address

May 10, 1999 8:00 am Secretary of State

05-10-1999 90189 004 ***150.00



318 SE 8TH PL CAPE CORAL F		318 SE 8TH PLACE CAPE CORAL FL 33990				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/13/1997]			
2. Principal Place of Business 2a. Mailing Address						4, FEI Number		Ap	plied For				
21	26				65-0781570		No	t Applicable	1				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required						
City & State City & State			-			6. Election Campaign Financing		\$5.00	May Be	ļ			
23 28						Trust Fund Contribution		Added t	,	1			
Zip Country Zip			Cou	ntry		8. This corporation owes the curre	nt year Inta	angible		}			
24 25 29			30			Personal Property Tax.	•	Yes	□No				
24	9. Name and Address of Currer		11			10. Name and Address of New Re	egistered .	Agent]			
				81	Name					1			
SOUTHWEST PROF SVS OF FT MYERS, INC. 13611 MCGREGOR BLVD				82	Street A	ess (P.O. Box Number is Not Acceptable)							
FTMYERS FL 33919				83		· ·				─ .			
				84	City			85 Zip (Code	1			
							<u> </u>	1		-			
l office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was itions of, Section 607,0505, Fl	authorized orida Stat	utes.	tne corpor	orporation submits this statement for the pration's board of directors. I hereby accept	tile appoil	ntment as re	gistered				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re					t signature red	quired when reinstating)	DATE	D 0/05070	DD (N) 40	∮ 🙊			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition	CR2E034 (11/98)			
TITLE	PD	☐ DELETE	1.1 ∏		1			☐ Change		=			
NAME	KUZMA, NANCY A		1.2 NAME		i					છે			
STREET ADDRESS	318 SE 8TH PL		1.3 STREET AD		ADDRESS					 -			
CITY-ST-ZIP	CAPE CORAL FL 33990		1.4 CITY		r-ZiP			D Ch	☐ Addition	1 뜻			
TITLE	VD	☐ DÉLETÉ	2.1 TI	TLE				Change		"			
NAME	KUZMA, TIMOTHY		2.2 NAME										
STREET ADDRESS	0,0,02 0,11,12		TREET	ADDRESS									
CITY-ST-ZIP	CAPE CORAL FL 33990		2.40	ITY-S	T-ZIP				T Addison	-			
TITLE		☐ DELETE	3.1 Ti	TLE				Change	Addition				
NAME			3.2 NA					•					
STREET ADORESS			3.3 STRE		ADDRESS								
CITY-ST-ZIP			3.4. CITY-		T-ZIP					4			
TITLE		☐ DELETE	4.1 1	TLE				Change	Addition				
NAME			4. 2 NAME		ļ								
STREET ADDRESS	is 4.3		4.3 S	.3 STREET ADDRESS									
CITY-ST-ZIP			4.4 C	CITY-ST-ZIP						1			
TITLE	☐ DELETE		5.1 T	5.1 TITLE				Change	Addition	1			
NAME			5.2 N	AME									
STREET ADDRESS			53S	TREET	ADDRESS								
CITY-ST-ZIP			5.4 CITY-ST-ZIP										

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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

☐ DELETE

SIGNATURE:

TITLE

STREET ADDRESS

☐ Change

Addition