	4
	ı
	1
	2
	7

	TICE: CORPORATION WILL BE DIS E ON OR BEFORE 09/15/99: \$550 (IF DISSO:			· FILED
F	PROFIT	FLORIDA DEPART	MENT OF STATE	<b>-</b>
	RPORATION JAL REPORT	Katherin	e Harris	90 JUL 26 AM 9: 27
i	P	Secretary DIVISION OF CO		A Property Course
<u> </u>	1999		DRPORATIONS	APPLICATION OF STATE
DOCUI	MENT # P98000(	043495		
1	ES SCHREIBER, P.A.			
	, , , , , , , , , , , , , , , , , , ,			C NEW PART THE TRUE TO THE TOTAL BOTH CONTROL OF THE PROPERTY
<u></u>				
Principal Place		Mailing Address		
	3771 ESSEX PLACE 3771 ESSEX PLACE BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134			
				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
/ -		1		. 05/11/1998
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 2840 Suite, Apt.		26 28400 W/A Suite, Apt. #, etc.	ITHROP CIRCLE	ED 75
22	w, 0.0.	27		5. Certificate of Status Desired Fee Required
City & State		City & State	in a	6. Election Campaign Financing \$5.00 May Be
23 <b>BONIT</b>	G Springs, Fl.	28 BONITA PROVI	Country	Trust Fund Contribution
24 34/3	4 25 USA	<u> </u>	USA	Intangible Personal Property. Yes No
	9. Name and Address of Current R	tegistered Agent	B1 Name	10. Name and Address of New Registered Agent
HE	ST, H. ANTHONY ESQUIRE			
	1 ESTERO BOULEVARD		82 Street Addr	ress (P.O. Box Number is Not Acceptable)
,	ite 20 Rt Myers Beach FL 33932		83	
ror	NI WIENS DEACH PL 33832		B4 City	85 Zip Code
11. Pursuant	to the provisions of sections 607 0502 a	nd 607 1508 Florida Statutes	the above-named corpor	ration submits this statement for the purpose of changing its registered
office or	registered agent, or both, in the State of	Florida. Such change was autons of, section 607,0505, Florida.	thorized by the corporation	on's board of directors. I hereby accept the appointment as registered
SIGNATURE				
12.	Signature, typed or printed name of registered agent ar OFFICERS AND		Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	SCHREIBER, CHARLES		1.2 NAME	0000029528007
STREET ADDRESS	3771 ESSEX PLACE BONITA SPRINGS FL 34134		1 3 STREET ADDRESS	-08/06/9901069009_
CITY-ST-ZIP TITLE	BONIIA SPRINGS FL 34134	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE	****150.00 ****150.00   Addition
NAME		F DELETE	2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		<u> </u>	2.4 CHY-ST-ZIP	
TITLE NAME		DELETE	3.2 NAME	Change Addition
STREET ADDRESS			33 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
STREET ADDRESS			42 NAME	Ì
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STREET ADDRESS CITY-ST-ZIP			53 STREET ADDRESS   54 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6 2 NAME	Shorter
STREET ADDRESS			6 3 STREET ADORESS	, 11
CITY-ST-ZIP			64 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 supplied must be same legal effect as if made under oath; that is 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Phone Proce I

V

July 14,1999

To Whom it May Concern:

As per my telephone call with Mark, I am asking for leniency on my filling fee for the 1999 Profit Corporation Annual Report. Charles Schreiber, P.A. was formed on May 11,1998. On July 17,1998 my accountant John Davis, CPA, of Fort Myers Beach, Florida was killed in an accident. I was not aware of any annual fees and moved to a new address last January where my mail at best was sporadically forwarded onto me. I can only ask for your favorable consideration on this matter.

Sincerely,

Chuck Schreiber (Charles Schreiber, P.A.)