2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
04 OCT 26 PM 1:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10/26/04 01038 004 $61.25

DOCUMENT # P98000080643

1. Entity Name
BMI OF SOUTHWEST FLORIDA, INC.

Principal Place of Business	Mailing Address
1323-B CAPE CORAL PKWY E. CAPE CORAL, FL 33906	1323-B CAPE CORAL PKWY E. CAPE CORAL, FL 33906

10182004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1323-B Cape Coral Pk.	1323B Cape Coral Pk E
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Cape Coral, Florida	City & State: Cape Coral, Florida
Zip: 33904 Country: USA	Zip: 33904 Country: USA

4. FEI Number: 65-0873949 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RUZICH, RICHARD J
605 GREEN DR.
KISSIMMEE, FL 34759

7. Name and Address of New Registered Agent
Name: Darrin R. Schutt
Street Address (P.O. Box Number Is Not Acceptable): 4524 SE 11th Place
City: Cape Coral FL Zip Code: 33904

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] DATE: 10/20/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BERGER-MEINS, ANGELIKA 1323 CAPE CORAL PKWY. E. CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Gomer, Brian D. 1323B Cape Coral Pkwy E Cape Coral, Florida 33904	☐ Change ☒ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] A. Berger-Meins 10/20/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #