

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S07208** (9)
1. Corporation Name
GULF BREEZE DEVELOPMENT CO.



Principal Place of Business

1219 OSCEOLA DRIVE
BOX 061487
FT. MYERS FL 33906

Mailing Address

1219 OSCEOLA DRIVE
BOX 061487
FT. MYERS FL 33906

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

WITTMAN, EDWAIN J
1219 OSCEOLA DR
FT. MYERS FL 33901

81

Name

82

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

83

84

City

FL

85

Zip Code

3. Date Incorporated or Qualified
10/19/1990

3a. Date of Last Report
06/20/1995

4. FET Number
65-0227726

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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0902 and 607.1503, 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 607.0503, Florida Statutes.

SIGNATURE

Signature of the person authorized to execute this report

Date of Signature

Date of Report

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
DP	WITTMAN, EDWIN J	1219 OSCEOLA DR.	FT. MYERS FL	
T	WITTMAN, KATHLEEN A	1219 OSCEOLA DR.	FT. MYERS FL	
V	LANDIS, STANLEY B	1633 ARDMORE RD.	FT MYERS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-STATE-ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY-STATE-ZIP	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY-STATE-ZIP	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 agreement with an address.

SIGNATURE: *Edwin J. Wittman* EDWIN J. WITTMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 (941) 939-2001

CR2E034 (12/95)