

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

1995 MAY -1 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 520742 (0)

1. Corporation Name

HOWAL OF LEE COUNTY CORPORATION

Principal Place of Business

**C/O CHESTER ORZEL
1721 S.E. 41ST STREET
CAPE CORAL, FL 33904**

Mailing Address

**C/O CHESTER ORZEL
1721 S.E. 41ST STREET
CAPE CORAL, FL 33904**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

State, Apt. # etc.

22

City & State

23

City & State

24

City & State

2a. Mailing Address

25

State, Apt. # etc.

26

City & State

27

City & State

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City & State

29

City & State

30

City & State

3. Date Incorporated or Qualified

12/13/1990

3a. Date of Last Report

4. FEI Number

65-0270957

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for filing fees under 5-199-032.

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

CHESTER ORZEL

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

1721 S.E. 41ST STREET

83

84 City

CAPE CORAL

FL

85 Zip Code

33904

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

(If the registered agent is not a resident of Florida, the registered agent must be a resident of Florida.)

4/24/95

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

**D
REKMAN, H.W.
1721 S.E. 41ST STREET
CAPE CORAL, FL 33904**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY, ST, ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY, ST, ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY, ST, ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY, ST, ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY, ST, ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY, ST, ZIP

**400001478224
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****200.00 ****200.00**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110 (17) (b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and make me liable for the same as if I were an officer or director of this corporation or the company or trustee empowered to issue this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

H. W. REKMAN

4/24/95 (813) 542-0890