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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # \$30374**

W.B. AN	ID H.D. CORP.					
Principal Plac	e of Business	Mailing Address		I (BBILBID (BB 11)15 GB(BB 15)11 (BB11 B1B1	01011 G1911 B1911 G1914 G19	111 01911 1001
1366 EAGLE WAY FT MYERS FL 33919 1366 EAGLE WAY FT MYERS FL 33919			DO NOT WRITE IN	TUIC CDACE		
					THIS SPACE	
				3. Date Incorporated or Qualifed		
3 0 1 1 1 1	No. of Discional	20 Mailine Address		02/06/1991 4. FEI Number	Appl	lied For
— ·	Place of Business	2a. Mailing Address		1	 ' -	Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc.	Q1	65-0280948	\$8,75 Ad	
	#, etc.	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	Fee Req	
City & Stat	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 M	
23		28		Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the current ye		
24	25	29 3	0	Personal Property Tax.		□No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Regist	ered Agent	
ALIA	CON CUV H ID		81 Name			
AMASON, GUY H., JR. 13161 MCGREGOR BLVD FT MYERS FL 33919			82 Street Add	dress (P.O. Box Number is Not Acceptable)	1000	
			20	,		
FIN	AIENO FL 33919		83			
			84 City	The second secon	85 Zip Co	ode
			1 1 '			
					 	
11.7 Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes	the above-named cor horized by the corporat	poration submits this statement for the purpor	se of changing its re	egistered stered
office or r	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Such change was aut ligations of, Section 607.0505, Florid	horized by the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	se of changing its re appointment as regi	egistered istered
office or r	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Such change was autiligations of, Section 607.0505, Florid	horized by the corporation and the statutes.	tion's board of directors. I hereby accept the	appointment as regi	egistered stered
office or a agent. I a SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Such change was autiligations of, Section 607.0505, Florid	horized by the corporation Statutes. Registered Agent signature requi	tion's board of directors. I hereby accept the	TE	stered
office or ragent. I a SIGNATURE 12.	registered agent, or both, in the Sta am familiar with, and accept the obl Signature, typed or printed name of registered.	ate of Florida. Such change was autiligations of, Section 607.0505, Florid agent and title of applicable. (NOTE: R AND DIRECTORS	horized by the corporated a Statutes. Registered Agent signature requi	tion's board of directors. I hereby accept the	TE RS AND DIRECTOR	RS IN 12
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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 chapted, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

941-48/-1349

May 03, 1999 8:00 am Secretary of State

05-03-1999 90025 012 ***150.00