FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **S49726** **(0)**

1. Corporation Name

GUETTLER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
~~4740 JORGENSEN RD~~ ~~FT. PIERCE FL 34981~~ ~~XXXXXXXXX~~	4740 JORGENSEN RD. FT. PIERCE FL 34981

2. Principal Address
21 — 8850 Lonesome Pine Trail
22 — Suite, Apt. #, etc.
23 — City & State: Ft. Pierce, Fl
24 — Zip: 34945
25 — County

2a. Mailing Address
26 — 8850 Lonesome Pine
27 — Suite, Apt. #, etc.
28 — City & State
29 — Zip
30 — County

3. Date Incorporated or Qualified: 05/03/1991

3a. Date of Last Report: 01/31/1995

4. FEI Number: 65-0270399 — ☐ 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

9. Name and Address of Current Registered Agent

GUETTLER, JUDY
4740 JORGENSEN ROAD
FT. PIERCE, FL 34981

10. Name and Address of New Registered Agent

81 Name: Fox Guettler, Judy
82 Street Address (P.O. Box Number is Not Acceptable): 8850 Lonesome Pine Tr.
83
84 City: Ft. Pierce, Fl 34945
FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		
PD GUETTLER, JUDY 4740 JORGENSEN RD. FT. PIERCE FL	☐ DELETE	Fox Guettler, Judy 8850 Lonesome Pine Ft. Pierce, Fl 34945
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	
	☐ DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition	
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition	
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition	
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition	
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition	
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition	

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)(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 changed, or on an attachment with an address.

SIGNATURE: Judy G. Fox — 3/16/96 — 407-284-1989 — 407-465-9552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)