SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 08 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # S51201 (9)JOE TUSSEY, INC. Principal Place of Business Mailing Address RT. 22. 7368 BARRAGAN RD., S.E. RT. 22. 7368 BARRAGAN RD., S.E. FORT MYERS FL 83912-3005 FORT MYERS FL 33912-3005 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/09/1991 4. FEI Number 04/29/1996 Applied For 2. Principal Place of Business 2a, Mailing Address 21 65-0264632 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TUSSEY, NADLEE RT. 22, 7368 BARRAGAN RD., S.E. Street Address (P.O. Box Number is Not Acceptable) 82 FORT MYERS FL 33912 83 84 City 85 Zip Code FL 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (4/97 DELETE Change Addition 1 1 TITLE TITLE TUSSEY, JOE F **1.2 NAME** RT. 22, 7368 BARRAGAN RD STREET ADDRESS 1.3 STREET ADDRESS FORT MYERS FL 1.4 CITY - ST - ZIP CITY-ST-ZIP ■ DELETE Change Acdition TITLE 2.1 TITLE TUSSEY, NADLEE NAME 2.2 NAME RT. 22, 7368 BARRAGAN RD STREET ADDRESS 2.3 STREET ADDRESS FORT MYERS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TOLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-2IP City-st-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-SI-ZIP 4.4 City - S1 - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change DELETE ☐ Addition TITLE 61 THILE

14. I do 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 changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.2 NAME

NAME

STREET ADDRESS

CITY-ST-ZIP

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0/20/07