SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1897. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # S91113

(8)

MODULAR MAILING SYSTEMS OF SOUTHWEST FLORIDA, IN

Principal Place of Business Mailing Address 2423 EAST MALL DRIVE 2423 EAST MALL DRIVE FILED

97 AUG -5 PM 3:53

SECRIENARY OF STATE TALLAHASSEE, FLORIDA



SUITE 124 FT. MYERS FL	23001	SUITE 124 FT. MYERS FL 33901			DO NOT WRITE IN THIS SPACE					
· · · m E · · ·		The Marketon Co.				3. Date Incorporated or Qualified	3a. Date	e of Last Report		
						10/31/1991	05/21	/1996_	\	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		ΔP	plied For	
21		26				65-0294022		No	t Applicable	
Suite, Apl. #, efc.		Suite, Apt. #, etc.			· <u> </u>	5. Certificate of Status Desired		\$8.75 A Fee Re		
City & State		City & Stato				6. Election Campaign Financing		\$5.00	May Bo	
23		28				Trust Fund Contribution		Added 1		
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid	d the currer	it vear Int	angible	
ब्र	25	29	30			Personal Property Tax due June 3	_	′) No	
	9. Name and Address of Current			T		10. Name and Address of New Reg	latered Ag	ent		
SISSON, LOUIS F., III					81 Name					
	5 PRESIDENTIAL COURT, SUITE A	1	20 0000		<u> </u>	10 O D ALL L STOLE AS A STOLE AS				
	MYERS FL 33919	•		82	Street A	reet Address (P.O. Box Number is Not Acceptable)				
F1. 9	WIEUP LT 228 IR			83						
										
				84	City		E)	85 Ζiρ (Code	
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.										
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 ported name of registered agent	and tide if any leading (But at	1 Benetur	v1 A row	t average and a	required when reinstating)	DATE		-)	
12.	OFFICERS AND		13.	o Ago	(Big -dice)	ADDITIONS/CHANGES TO OFFICE		RECTOR	S IN 12	
TITLE	PTD OFLETE			1.) IBLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Addition	
NAME	MAHON, JOSEPH J.			12 NAME		വാവവായ	RIB	9n-	:a ∣	
STREET ADDRESS	2423 EAST MALL DRIVE			1.3 STREET ADDRESS		0000022 -08/08/3 *****165)7DII	184	114 💛 📙	
•	FT. MYERS FL			1.4 Criy - ST - ZiP		*****165	.00 *	***16	5.00	
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	MAHON, TINAMARIE		•	2.2 NAME				, 514		
NAME									i	
STREET ADDRESS	2423 EAST MALL DRIVE			2.3 STREET ADDRESS 2.4 CHY-ST-ZIP					ſ	
CITY-ST-ZIP	FT. MYERS FL	Totiese			211			Change	Addition	
TITLE				3 1 TIFLE			_	Lounde		
NAME	FERRANTE, THOMAS B.			3.2 NAME 3.3 STREET ADDRESS						
STREET ADDRESS	1793 W. HILLSBOROUGH AVE				1				j	
City-St-Zip	TAMPA FL			3 4. CATY - ST - ZIP				Channe	Addition	
TITLE		☐ DELETE	4.13		ĺ			Change	CT Addition	
NAME]			1	MAME	}				}	
STREET ADORESS					DDRE\$S	. <i>D</i>				
CITY-ST- ZIP				11Y-S1	ZIP			1-2		
TITLE		DELETE	5.11	ITLE	i	· · · · · · · · · · · · · · · · · · ·	a	Change	Addition	
NAME			5.2 N	MME		Q.1-9	l			
STREET ADDRESS			535	TREET A	DORESS	y •'			}	
CITY-ST-ZIP			540	11Y-S1	ZIP	<u> </u>				
TALE		☐ DELETE	611	IRLE	1			Change	☐ Addition	
NAME			6.2 N	MME	1					
STREET ADDRESS			635	IFEET A	DORESS				Į	
CITY-ST-ZIP				11Y-51						
	by certify that the information supplied	with this filing does not quali	ly for the	exon	ption sta	ated in Section 119.f :rida Statutes	. I further ci	ortify that	the	

information indicated on this annual report or supplemental annual report is true and accurate and that my signature is an afficer or director of the curporation or the regulifer or trustee empowered to execute this report as require appears in Block 12 or Block 13 if changed, or op an all achment with an address.

iter 607, Florida Statutes; and that my name