FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2511-A TAMIAMI TRAIL



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$99523

(0)

Mailing Address

ACCESSIONAL BERVICES NO.S.

SMOAK & WILLIAMS AGENCY, INC.

FILED Jun 13 1997 8:00am Secretary of State



2511-A TAMIAMI TRAIL PORT CHARLOTTE FL 33952		2511-A TAMIAMI TRAIL PORT CHARLOTTE FL 33952-6401					
					3. Date Incorporated or Qualified 12/09/1991	3a. Date of Last 02/27/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0298534	· —	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	 		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Z ip 24	Country 25	Zip Country 30			This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Reg	istered Agent	
	/AW, BEATRICE A.		81	Name			
	2 EDGEWATER DR.		82 Street Add		dress (P.O. Box Number is Not Acceptable	e)	
POR	T CHARLOTTE FL 33952		50.0017 (30.00		and the best remote to ret necessary	-,	
	<u>^</u>		83		1.1.1.1		
	,		84	City		FL 85 Zip	p Code
Office of I	regi ster ed agent, or both, in the State	e of Florida. Such change was aut	horized b	v the corpor	rporation submits this statement for the pu ation's board of directors. I hereby accept		its registered is registered
SIGNATURE	am familiar with, and accept the oblic			-			
12,		ent and title if applicable (NOTE: F ID DIRECTORS	tegistered Agr	on: signature req	uired when reinstating)	DATE	200 111 10
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	
NAME	WILLIAMS, ALAN		1.2 NAME			Change	E Addition
STREET ADDRESS	15371 HUNTINGTON CT		1.3 STREET ADDRESS				
	FT MYERS FL		1 ;		4		
CITY-ST-ZIP TITLE	ST	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE			Change	Addison
NAME	WILLIAMS, ESTHER W.		22 NAME			[_] Change	Addition
STREET ADDRESS	15371 HUNTINGTON CT						
	FT MYERS FL		2.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	1130161016	DELETE	2. 4 CITY - : 3.1 TITLE	S1-ZIP		Charac	
NAME	-		i	•		Change	Addition
STREET ADORESS			3.2 NAME	4000000			
CITY-ST-ZIP			3.3 STREET	1			
TITLE		DELETE	3.4. CITY - 5 4.1 TITLE	SI - ZIP			1 4 4 4 1 1
NAME						☐ Change	L] Addition
			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - S	1 - ZIP			
		DECENE	5.1 TITL€			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		Longe	5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP	ou partify that the information and	et with this files are a second at the	64 CITY-S	T-ZIP			
informatio	of the community in the information supplies in indicated on this appual report or the corporation of the co	o with this filing does not qualify fi supplemental annual report is true the receiver or trustee empowers	or ine exe and accu ed to exec	mption state trate and tha ute this rend	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same legal i ort as required by Chapter 607, Florida Sta	I further certify that effect as if made un stutes: and that mu.	t the nder oath; that name
appears ii	n Block 12 or WALTHINGSTICERO	FEBSIONAL BERVICES HIS	s.			und Plat Hy	