

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V07682** (0)

1. Corporation Name
HIWASSE, INC.



Principal Place of Business
**600 FIFTH AVENUE SOUTH
SUITE 210
NAPLES FL 33940**

Mailing Address
**600 FIFTH AVENUE SOUTH
SUITE 210
NAPLES FL 33940**

3. Date Incorporated or Qualified
01/21/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business
21 600 Fifth Avenue South
Suite, Apt. #, etc.
22 Suite 207
City & State
23 Naples, FL
Zip
24 33940

2a. Mailing Address
26 600 Fifth Avenue South
Suite, Apt. #, etc.
27 Suite 207
City & State
28 Naples, FL
Zip
29 33940

Country
25 USA

Country
30 USA

4. FEI Number
65-0313530

Applied For
☐ 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

10. Name and Address of New Registered Agent

**BRUGGER, JOHN N.
600 FIFTH AVENUE SOUTH
SUITE 210
NAPLES FL 33940**

81 Name John N. Brugger
82 Street Address (P.O. Box Number is Not Acceptable) 600 Fifth Avenue South
83 Suite 207
84 City Naples, FL **85 Zip Code 33940**

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

April 16, 1996

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

VSD ☐ DELETE
NAME BRUGGER, JOHN N.
STREET ADDRESS 600 FIFTH AVE SOUTH 6210
CITY-ST-ZIP NAPLES FL

PTD ☐ DELETE
NAME BRUGGER, CAROL R.
STREET ADDRESS 600 FIFTH AVE SOUTH 6210
CITY-ST-ZIP NAPLES FL

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

VSD ☒ Change ☐ Addition
1.1 TITLE Brugger, John N.
1.2 NAME Brugger, John N.
1.3 STREET ADDRESS 600 Fifth Avenue South, #207
1.4 CITY-ST-ZIP Naples, FL 33940

PTD ☒ Change ☐ Addition
2.1 TITLE Brugger, Carol R.
2.2 NAME Brugger, Carol R.
2.3 STREET ADDRESS 600 Fifth Avenue South, #207
2.4 CITY-ST-ZIP Naples, FL 33940

☐ 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

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)(k), 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:

Carol R. Brugger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 16, 1996 941-263-6000

Date

Daytime Phone #

CR2E034 (12/95)