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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V11614

1. Corporation Name

Principal Place of Business

CITY-ST-ZIP

DONALD R. RHODES, CPA, P.A.

1402 SE 46TH L CAPE CORAL FI US		1402 SE 46TH LANE Cape Coral FL 33904 US					DO NOT WRI Date Incorporated or Qualifed 02/03/1992	TE IN THIS S	SPACE	
2. Principal Pl	ace of Business	2a. Mailing Address		—			El Number			Applied For
21	, age of paginoss	26					65-0311884 [*]	÷		Not Applicable
Suite, Apt. :	#. etc.	Suite, Apt. #, etc.							\$8.7	5 Additional
22		27	rietar . cresto .			5. (Certifcate of Status Desired		Fee	Required
City & State		City & State				i i	Election Campaign Financing Trust Fund Contribution		•	00 May Be ed to Fees
Zip	Country	Zip	Countr	у		8. 1	This corporation owes the curr	ent year Intai	ngible	N
24	25	29 3	0 .				Personal Property Tax.		☐ Yes	<u></u>
	9. Name and Address of C	urrent Registered Agent				10. I	Name and Address of New I	Registered A	gent	
			81	1 N	ame					
RHODES, DONALD R. 1402 SE 46TH LANE			82	2 S	treet Addre	ss (P.	O. Box Number is Not Accept	able)		
CAPE	E CORAL FL 33904		83	3						
			84	4 C	ity			FL	85	Zip Code
office or re	edistered agent or both in the 3	7.0502 and 607.1508, Florida Statutes State of Florida. Such change was aut obligations of, Section 607.0505, Florid	nonzea pv	v tne	med corporation	oration n's boa	submits this statement for the ard of directors. I hereby acce	purpose of c pt the appoint	hanging tment a	its registered s registered
SIGNATURE	Signature, typed or printed name of register	ed agent and title if applicable (NOTE: F	tegistered Age	ent siar	nature required	when reli	nstating)	DATE	•	
12.		S AND DIRECTORS	13.				DDITIONS/CHANGES TO OF	FICERS AND	DIRE	CTORS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE						☐ Char	nge 🗌 Addition
NAME	RHODES, DONALD R.		1.2 NAME	•			•			,
STREET ADDRESS	1401 SE 46TH LN		1.3 STREE	ET ADD	RESS)
CITY-ST-ZIP	CAPE CORAL FL		1.4 CITY-	ST-ZIP	·					
TITLE	D	☐ DELETE	2.1 TITLE						☐ Chai	nge
NAME	RHODES, DONALD R.	•	2.2 NAME				,			
STREET ADDRESS	1402 SE 46TH LANE	-	2.3 STREE	ET ADE	DRESS					
CITY-ST-ZIP	CAPE CORAL FL	The Control of the Co	2.4 CITY	ST-ZII	p					
TITLE		☐ OELETE	3.1 TITLE						Cha	nge 🗌 Addition
NAME			3.2 NAME	•	į					
STREET ADDRESS			3.3 STRE	ET ADO	ORESS					
CITY-ST-ZIP			3.4. CITY-		P					nge
TILE		☐ DELETE	4.1 TITLE						Cha	nge 🗆 Addition
NAME	, ·		4. 2 NAME	E	l					
STREET ADDRESS	-		4.3 STRE	ET ADI	DRESS					
CITY-ST-ZIP			4.4 CITY-		<u>-</u>					nge
TITLE ·		☐ DELETE	5.1 TITLE						☐ Cha	ilge 🗀 Addition
NAME			5.2 NAME				•	•		
STREET ADDRESS			5.3 STRE							
CITY-ST-ZIP		F7 = 1	5.4 C/TY-		<u>-</u>					nge
TITLE		☐ DELETE	6.1 TITLE						☐ Cha	ilde 🗀 waannon
NAME	,		6.2 NAME		20500		•			
ATAFET + 0000000	İ		6.3 STRE	± IADΩ	JKESS I					

14. I 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, with all other like empowered. SIGNATURE:

6.4 CITY-ST-ZIP

Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90012 002 ***150.00