PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # HAG797

 Corporation 	GORDA RENT-ALL AND SA							
Principal Place of Business Mailing Address						- (199191) Ett. 81849 Atti 18410 14911 1684 6184	. 61811 61841 61911	
% CHARLES E. MANTLE JR. 25115 MARION AVE PUNTA GORDA FL 33950		% Charles e. Mantle Jr. 25115 Marion ave Punta Gorda fl 33950				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
						02/25/1985		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	oplied For
21		26				59-2502735		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional equired
22		27 City 6 Ctata						
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
23 Zin	Zip Country Zip			try		This corporation owes the current year		10 1 000
	25	29 30	_	,		Personal Property Tax.	Yes	⊠ No
24	9. Name and Address of Currer		<u>'</u>			10. Name and Address of New Registere	d Agent	
	. Hand and Addiese of Garies		8	31	Name			
MANTLE, CHARLES E. JR.			-	_		(D.O. O. N. Harris Nat Association	,	
25115 MARION AVE			3	32	Street Address (P.O. Box Number is Not Acceptable)			
PUNTA GORDA FL 33950			1	33	-			
•								
				34	City	F	85 Zip	Code
office or re agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligations. Signature, typed or printed name of registered age	of Florida, Such change was auritions of, Section 607.0505, Florida	a Statut	es.	ne corporation		Online it us it	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	CD DELETE 1.1						□ Change	L. Acquitori
NAME (1.2 NAM					
STREET ADDRESS			1.3 STR	1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 CITY		-ZIP		Change	Addition
TITLE			2.1 TITL	E			☐ Criange	L Addition
NAME			i i	2.2 NAME				
STREET ADDRESS					ADDRESS		ž.	
CITY-ST-ZIP			2.4 CIT		T-ZIP		Change	Addition
TITLE	<u> </u>		3.1 TITL				L. J Change	
NAME	MANTLE, SUZANNE E.		3 2 NAME					Ì
STREET ADORESS	****			3.3 STREET ADDRESS				
CITY-ST-ZIP	PUNTA GORDA FL		3.4. CITY		T-ZIP		☐ Change	Addition
TITLE .		☐ DELETE	4.1 TITLE					
NAME				4.2 NAME 4.3 STREET ADDRESS		,		ļ
STREET ADDRESS					Į.			}
CITY-ST-ZIP		☐ DELETE	4.4 CITY		-ZIP		Change	Addition
TITLE	{	□ Detele	5.1 TITL 5.2 NAM					_ ,
NAME					ADDRESS	·		
STREET ADDRESS			5.4 CITY					}
CITY-ST-ZIP		□ DELETE	6.1 TITL				Change	Addition

CITY-ST-ZIP 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

□ DELETE

941-637-1511

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90030 028 ***150.00