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**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name H02499

(2)

C/O JOHN J. HESS 1855 TARPON RD. NAPLES FL 33962  2. Principal Flace of Business 2. Principal	3. Date Incorporated or Qualified 05/07/1984  4. FEI Number 59-2441690  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes	Fee \$5.  Add ntangible tax under No egistered Agent	Applied For Not Applicable  5 Additional Required  00 May Be ed to Fees
2. Principal Flace of Business  26. Mailing Address  27. Suite, Apt. #, etc.  28. Suite, Apt. #, etc.  29. Coty & State  29. Zip Country  29. Name and Address of Current Registered Agent  HESS, JOHN J.  1855 TARPON RD.  NAPLES FL 33962  83. Street Add  19. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corpor or registered agent, or both, in the State of Florida Such change was authorized by the corporation's bod familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Supplied function from both and is of registered agent and the integral, after the provisions of provided agent and the integral, after the provisions of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral, after the provision of provided agent and the integral and th	5/07/1984      FEI Number     59-244 1690      Certificate of Status Desired      Election Campaign Financing     Trust Fund Contribution      This corporation has liability for in     Florida Statutes     Yes      Name and Address of New Re	\$8.7 Fee \$5.1 Add ntangible tax under No egistered Agent	Applied For Not Applicable  5 Additional Required  00 May Be ed to Fees
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Suite, Apt. #, etc.    Suite, Apt. #, etc.	5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Re	Fee \$5.  Add ntangible tax under No egistered Agent	5 Additional Required 00 May Be led to Fees
City 8 State  City 8 State  Zip  Country  Zip  Country  Zip  Signard Registered Agent  81 Name  HESS, JOHN J. 1855 TARPON RD. NAPLES FL 33962  83 B4 City  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above named corporarregistered agent, or both, in the State of Florida Such change was authorized by the corporation's bod familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13.  BILE  PD  HESS, JOHN J. 13.STREET ADDRESS  1855 TARPON RD. NAPLES FL  14. CITY-ST-ZIP  THE  D  MAM: HESS, MARY E. 1855 TARPON RD. 23 STREET ADDRESS  1855 TARPON RD. 31 TITLE  DELETE  33 TITLE  DELETE  34 TITLE  DELETE  34 TITLE  DELETE  35 TARPON RD.	6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Re	Fee \$5.  Add ntangible tax under No egistered Agent	Pequired  May Be led to Fees
Zip Country Zip Country Zip Country  28 30  9. Name and Address of Current Registered Agent  HESS, JOHN J. 1855 TARPON RD. NAPLES FL 33962  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corpor or registered agent, or both, in the State of Florida Such change was authorized by the corporation's bod familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Supulses speed or metod here of registered agent and life it applied to Provide Statutes.  SIGNATURE  Supulses speed or metod here of registered agent and life it applied to Provide Statutes.  SIGNATURE  Supulses speed or metod here of registered agent and life it applied to Provide Statutes.  SIGNATURE  Supulses speed or metod here of registered agent and life it applied to Provide Statutes.  SIGNATURE  Supulses speed or metod here of registered agent and life it applied to Provide Statutes.  SIGNATURE  DELETE  1.1 TITLE  1.2 NAME  HESS, JOHN J.  1.3 STREET ADDRESS  CITY ST-ZIP  PILL  DELETE  2 1 TITLE  AMM:  HESS, MARY E.  2 2 NAME  1.4 CITY-ST-ZIP  PILL  DELETE  3 1 TITLE  3 1 TITLE  3 2 NAME	Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Re	Add ntangible tax under No egistered Agent	ed to Fees
## PD PICERS AND DIRECTORS  ## PD DELETE 1.1 TITLE  ## PD DELETE 1.3 STREET ADDRESS  ## PESS, MARY E. 22 NAME  ## PESS, MARY E. 23 STREET ADDRESS  ## PESS, MARY E. 23 STREET ADDRESS  ## PESS, PAPPON RD. 23 STREET ADDRESS  ## PESS, PAP	8. This corporation has liability for in Florida Statutes X Yes  10. Name and Address of New Re	ntangible tax under No egistered Agent	
9. Name and Address of Current Registered Agent  HESS, JOHN J. 1855 TARPON RD. NAPLES FL 33962  83  84 City  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Fiorida Statutes, the above named corporar registered agent, or both, in the State of Florida Such change was authorized by the corporation's bod familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature spiect product name of registered agent and life-in applicable.  PD  OFFICERS AND DIRECTORS  13.  INTILE  NAME  HESS, JOHN J. 1.3 STREET ADDRESS  1.1 TITLE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  THE  D  DELETE  2 1 TITLE  AAM: HESS, MARY E. 22 NAME  SIRRET ADDRESS  NAPLES FL  1855 TARPON RD. 23 STREET ADDRESS  NAPLES FL  11LE  D  DELETE  3 1 TITLE  3 1 TITLE  AAM:  AMPLES FL  1.1 TITLE  3 1 TITLE  3 1 TITLE  3 1 TITLE  AAM:  AMPLES FL  1.4 CITY-ST-ZIP  1.4 C	Florida Statutes X Yes  10. Name and Address of New Re	□ No egistered Agent	
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SIGNATURE   Segretable   Segr	ation submits this statement for the purp rd of directors. I hereby accept the appo	pose of changing its sintment as registere	registered office ; ed agent, I am
12. OFFICERS AND DIRECTORS   13.			
PD	d when reinstating)	DATE	
NAME         HESS, JOHN J.         1.2 NAME           STREET ADDRESS         1855 TARPON RD.         1.3 STREET ADDRESS           CTY ST-ZP         NAPLES FL         1.4 CITY-ST-ZIP           DTILE         DELETE         2 THILE           NAME         HESS, MARY E.         22 NAME           STREET ADDRESS         1855 TARPON RD.         2.3 STREET ADDRESS           CITY ST-ZP         NAPLES FL         24 CITY-ST-ZIP           TILE         DELETE         3 1 TILE           NAME         32 NAME	ADDITIONS/CHANGES TO OFFIC		ة اــــــــــــــــــــــــــــــــــــ
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CITY-SE-ZIP			

To nereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. 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 in triangul, or on an attachment with an address.

| Continue of the corporation 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 in triangul, or on an attachment with an address.

| Continue of the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, Turther oath, Florida Statutes, Turther oa

SIGNATURE: