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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **K23076** (8)
1. Corporation Name
NORTH AMERICAN PROPERTIES - SOUTHEAST, INC.



Principal Place of Business
**12995 S. CLEVELAND AVE., #214
FT. MYERS FL 33907**

Mailing Address
**12995 S. CLEVELAND AVE., #214
FT. MYERS FL 33907-3807**

3. Date Incorporated or Qualified 05/10/1988	3a. Date of Last Report 05/01/1996
4. FEI Number 31-1239448	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	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

9. Name and Address of Current Registered Agent

**HAFELE, DALE G.
12995 S. CLEVELAND AVE., #214
FT. MYERS FL 33907**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	WILLIAMS, THOMAS L.	☐ Change ☐ Addition	
212 E. THIRD ST		1.3 STREET ADDRESS	
CINCINNATI OH		1.4 CITY - ST - ZIP	
VD	WILLIAMS, WILLIAM J., JR	☐ Change ☐ Addition	
212 E. THIRD ST		2.1 TITLE	
CINCINNATI OH		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY - ST - ZIP	
DVS	HAFELE, DALE G.	☐ Change ☐ Addition	
5442 HARBOUR CASTLE DR.		3.1 TITLE	
FT. MYERS FL		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
TD	MODRALL, ANDREW R.	☐ Change ☐ Addition	
212 E. THIRD ST		4.1 TITLE	
CINCINNATI OH		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 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.

SIGNATURE: *[Signature]* 4/15/97 941-224121

CR2E034 (9/96)