FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90038 024 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

i. Corporation	MENT # K44639 OYAL PROPERTIES, INC.				1 (40)4() ( <b>4</b> () <b>4</b> ()	<b>3</b> 11 <b>3</b> 1818 <b>3</b> 1188 1188 1 <b>3</b> 14	OJOH BIRH OMNI ARRI O	1811 81811 1881
Principal Place		Mailing Address						
C/O ANTHONY J. CATALANO 4200 GULF SHORE BLVD. N.		4200 GULF SHORE BLVD. N NAPLES FL 34103						
NAPLES FL 34103		US				OO NOT WRITE IN	THIS SPACE	
US		•			.3. Date Incorporate	or Qualifed		
					11/10/1988			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number			plied For
21		26			65-0082115	·		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of State	us Desired 🔲	<b>\$8.75</b> A Fee Re		
22		City & State		<u> </u>	· · · · · · · · · · · · · · · · · · ·			·
City & State	e	<del>  </del>			6. Election Campaig Trust Fund Contr	- 11	\$5.00 Added t	•
Zip	Country	<b>28</b>	Country		8. This corporation	•		
24	[25]	29 3	-, ·		Personal Propert	-	☐ Yes	□No
24	9. Name and Address of Current		<del>"</del>		10. Name and Addr		tered Agent	
		<del></del>	81	Name				
CATALANO, ANTHONY J.				Street Add	ress (P.O. Box Number i	s Not Accentable)		
4001		102	Street Addi	ress (r.c. box reambor)	31101 7 (Gooptable)			
SUITE 404			83		•			
NAP	LES FL 34103		84	City			85 Zip C	Code
		والمناسب يرمها		'			FL     `	
office or re agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	and 607.1508, Florida Statutes f Florida. Such change was aut ons of, Section 607.0505, Florid	, the above horized by la Statutes	e-named corp the corporation.	ooration submits this stat on's board of directors. I	ement for the purpo hereby accept the	ose of changing its appointment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Ager	nt signature require	ed when reinstating)		ATE	
12.	. OFFICERS AND		13.		ADDITIONS/CHAI	NGES TO OFFICE	_	
πιε	D	☐ DELETE	1.1 TITLE				Change	☐ Addition
NAME	LUTGERT, SCOTT F.		1.2 NAME	-				
STREET ADDRESS	4200 GULF SHORE BLVD. N.		1.3 STREET	T ADDRESS				
CITY-ST-ZIP	NAPLES FL		1.4 CITY-S	T-ZIP			Change	☐ Addition
TITLE ~	VPSD	☐ DELETE	2.1 TITLE	Į			☐ Change	☐ Addition
NAME	RICHARD J BAKER		2.2 NAME					
STREET ADDRESS	4200 GULF SHORE BLVD N		2.3 STREET			_		
CITY-ST-ZIP	NAPLES FL 34103	DELETE	2.4 CITY-S	ST-ZIP	· ·	•	[] Change	Addition
TITLE	VTAS	☐ DELETE	3.1 TITLE				_ опануо	
NAME	HOWARD B GUTMAN		3.2 NAME					
STREET ADDRESS			3.3 STREET					
CITY-ST-ZIP	NAPLES FL 34103	☐ DELETE	3.4. CITY-S 4.1 TITLE	ST-ZIP			Change	☐ Addition
TITLE		Detric	4. 2 NAME	1				
NAME				T ADDRESS				
STREET ADDRESS			4.3 STREET					
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	1-21			☐ Change	Addition
NAME			5.2 NAME			•	_ <i>-</i>	
STREET ADDRESS			5.3 STREET	TADDRESS				
CITY-ST-ZIP			5.4 CITY- S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
A141.00	Ì		6.2 NAME	ı				

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filting 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 supplied that it is to be 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 reserver on the reserver of the corporation or the reserver of the corporation of the corporation or the reserver of the corporation or the reserver of the corporation or the reserver of the corporation of the cor

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

<del>(1941-), 261-6100</del>

CR2E034 (11/98).