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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P9600007552** (8)

RICHARD W. SHAFFER, II, P.A.

Principal Place of Business 4548 GENOA AVENUE

Mailing Address

4548 GENOA AVENUE

FILED Feb 06 1997 8:00am Secretary of State



NAPLES FL 33940		NAPLES FL 34103-3245							
					3. Date Incorporated or Qualified 01/24/1996	3a. Da	te of Last F	Report	
	lace of Business	2a. Mailing Address			4. FEI Number	*****	Applied For		
21 106	I EGRETS WALK CIRCLE	26 1061 EGRETS	1061 EGRETS WALK CIRCLE		= 65-0651077	,	Not Applicable		
Suite, Apt. 22		Suite, Apt. #, etc. /02			5. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & State 3 NAP		City & State 28 NAPLES	FL		Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip 24 34108-	2498 25 U.S	Zip 29 34/08-2498	30 Cou	US		Yes [IJ No	199.032	
	Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered /	Agent		
Shaffer, Richard W II 4548 Genoa Avenue Naples FL 33940				81 Name SHAFFER, PICHARO W JF 82 Street Address (P.O. Box Number is Not Acceptable) /// / FERETS WALK CIRCLE # 102 83					
				B4 City N	APLES	FL	85 Zip 3416	Code 2-2498	
agent I a SIGNATURE	DN TW				oration's board of directors. I hereby acce	pt the app	ointment as 0- 97	eragi ci.	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	R\$ IN 12	
TITLE	D	DELETE	1.1 7[7	LE	D .		Change	Addition	
NAME	Shaffer, Richard W II		1.2 NA	ME	RICHARD W SHAFFER 1 1061 EGRETS WALKCH NAPLES, FL 34108-2	I			
STREET ADDRESS	4548 GENOA AVENUE		13 ST	REET ADDRESS	1061 EGRETS WALKCI	ecle,	#102		
CITY-ST-7P	NAPLES FL 33940		14.00	ry-st-zip	NAPLES, FL 34108-2	198			
TITLE		☐ DELETE	21 7/1	LE	•		Change	Addition	
NAME			2.2 NA	.ME					
STREET ADDRESS			2.3 \$1	reet address					
CITY-ST-ZIP		T 051545		TY - ST - ZIP			T 1 05	The same of	
TITLE		DELETE	3.1 111	1			Change	☐ Addition	
NAME			3.2 NA						
STREET ACORESS				REET ADDRESS					
CHY-ST-ZIP TITLE		DELETE	4.1 Tr	TY-ST-ZIP			Change	Addition	
NAME			4. 2 N						
STREET ADDRESS			- 1	REET ADORESS					
CITY - S1 - ZIP				TY-ST-ZIP					
Tiltf		DELETE	5.1 TIT			***************************************	Change	Addition	
NAME:			52 NA	ME			•		
STREET ADDRESS				REET ADDRESS					
City-S1-7-P				TY-ST-ZIP					
TITLE		DELETE	6170				Change	Addition	
NAME			6.2 NA						
STREET ADDRESS			6.3 ST	REET ADDRESS					
CITY-ST-ZIP			6.4 CI	TY-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 included on this annual report or supplicmental 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 eor pratio, 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 this production or on an attachment with an address

SIGNATURE: