

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 # M22890

(1)

1. Corporation Name
R.E.S.I.D.E., INC.

FILED

97 JUL 25 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

591 GULF PARK DR.
NAPLES FL 33963
US

Mailing Address

591 GULF PARK DR.
NAPLES FL 34108-8206
US

3. Date Incorporated or Qualified
11/04/1985

3a. Date of Last Report
04/11/1996

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

25

29

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4. FEI Number
59-2572187

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HILLER, JUDY L.
591 GULF PARK DR.
NAPLES FL 33963

81 Name

JUDY L. HILLER

82 Street Address (P.O. Box Number is Not Acceptable)

3607 COLE AVE #227

83

1472 MUREX DR. FL 34102

84 City

DALLAS NAPLES TX

85 Zip Code

75204

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

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPV
NAME HILLER, JUDY L.
STREET ADDRESS 591 GULF PARK DR.
CITY-ST-ZIP NAPLES FL

TITLE S
NAME HILLER, JUDY L.
STREET ADDRESS 591 GULF PARK DR.
CITY-ST-ZIP NAPLES FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPV
1.2 NAME HILLER, JUDY L.
1.3 STREET ADDRESS 3607 COLE AVE #227
1.4 CITY-ST-ZIP DALLAS TX 75204

2.1 TITLE S
2.2 NAME HILLER, JUDY L.
2.3 STREET ADDRESS 3607 COLE AVE #227
2.4 CITY-ST-ZIP DALLAS TX 75204

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

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]

4/22/97

04/22/97

CR2E034 (9/96)