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Apr 14 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 415828 (3)  
1. Corporation Name  
NAPLES ROAD BUILDING CORPORATION

Principal Place of Business 4500 EXECUTIVE DR., SUITE 210 SUITE 300 NAPLES FL 33999 US	Mailing Address 4500 EXECUTIVE DR., SUITE 210 SUITE 300 NAPLES FL 34119-8907 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/02/1973	3a. Date of Last Report 03/13/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1435959		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent JOHNSON, ROBERT W., JR. 4500 EXECUTIVE DR., SUITE 210 SUITE 300 NAPLES FL 33999		10. Name and Address of New Registered Agent 81. Name JANET KELLY 82. Street Address (P.O. Box Number is Not Acceptable) 4500 EXECUTIVE DRIVE 83. <del>NAME</del> 84. City NAPLES FL 85. Zip Code 34119	
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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]* *Treasurer* DATE: 4/7/97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	SECRETARY/TREASURER
NAME	HARDY, ROBERT	1.2 NAME	JANET KELLY
STREET ADDRESS	13056 PONDAPPLE DR.W	1.3 STREET ADDRESS	4500 EXECUTIVE DR #300
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	NAPLES FL 34119
TITLE	VD	2.1 TITLE	
NAME	HARDY, PAUL	2.2 NAME	
STREET ADDRESS	5780 24 AVE NW	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	
TITLE	VSD	3.1 TITLE	
NAME	SHIELDS, JAMES E.	3.2 NAME	
STREET ADDRESS	11724 QUAIL VILL WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	JOHNSON, ROBERT W.	4.2 NAME	
STREET ADDRESS	4500 EXECUTIVE DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	HOWELL, W. SHANNON	5.2 NAME	
STREET ADDRESS	4500 EXECUTIVE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]* DATE: 2/14/97 DAYTIME PHONE: (941) 597-9061  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR