

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

FILED

Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 415828 (3)  
1. Corporation Name  
NAPLES ROAD BUILDING CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business 4500 EXECUTIVE DR., SUITE 210 SUITE 300 NAPLES FL 34119 US	Mailing Address 4500 EXECUTIVE DR., SUITE 210 SUITE 300 NAPLES FL 34119 US
--	--

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 34119 25 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 34119 30 Country
--	---

3. Date Incorporated or Qualified 02/02/1973	4. FEI Number 59-1435959	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent KELLY, JANET 4500 EXECUTIVE DRIVE NAPLES FL 34119	
--	--

10. Name and Address of New Registered Agent	
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	
TITLE	PD
NAME	HARDY, ROBERT
STREET ADDRESS	13056 PONDAPPLE DR.W
CITY-ST-ZIP	NAPLES FL
TITLE	VD
NAME	HARDY, PAUL
STREET ADDRESS	6780 24 AVE NW
CITY-ST-ZIP	NAPLES FL
TITLE	ST
NAME	KELLY, JANET
STREET ADDRESS	4500 EXECUTIVE DR., #300
CITY-ST-ZIP	NAPLES FL
TITLE	V
NAME	HOWELL, W. SHANNON
STREET ADDRESS	4500 EXECUTIVE DRIVE
CITY-ST-ZIP	NAPLES FL
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	SUITE 300
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	DIRECTOR
5.3 STREET ADDRESS	OUTROBERT, DARRYL
5.4 CITY-ST-ZIP	4500 EXECUTIVE DRIVE STE 300
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	NAPLES FL 34119
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 \_\_\_\_\_ JANEL KELLY TO: AS PER 3/5/98 (941) 597-0161

CR2E034 (10/97)