3-19-97 B-3251 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 613872

(1)

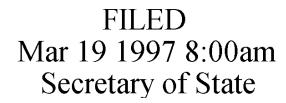
NAPLES FL 34102-4980

PIPPIN'S OF NAPLES, INC.

NAPLES FL 33940

Principal Place of Business Mailing Address

1400 GULFSHORE BLVD N 1400 GULFSHORE BLVD N



3a. Date of Last Report

05/01/1996



3. Date Incorporated or Qualified

04/01/1979

· ·	lace of Business	Za. Mailing Address			4. FEI Number	Applied For	
21		26			59-1888643	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State					6. Election Campaign Financing	\$5.00 May Be	
23 28					Trust Fund Contribution	Added to Fees	
Zip	Country	Zψı	Country		8. This corporation has liability for intengit	ole tax under s. 199.032,	
24 25 29 30					Florida Statutes Yes	□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
PHILLIPS, D M				Name			
1400 GULFSHORE BLVD N				82 Street Address (P.O. Box Number is Not Acceptable)			
NAPLES FL 33940				Sired Address (F.O. Box Northberts Not Acceptable)			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
					** * * * · · · · · · · · · · · · · · ·		
			84	City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	92 and 607 1508. Florida Statuto	es The above	-named corp	oration submits this statement for the number	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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or product name of registers a separative and talk of applicable (NOT). Registered Agreal signature required when reinstabling) DATE DATE							
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	(
TALE	PD DEATH OF A	☐ DELETE	1.1 TITLE	İ		Change Addition	
NAME	PHILLIPS, DENNIS M		1.2 NAM(1		7	
STREET ADDRESS	3480 RUM ROW		1.3 STHEET	ADDRESS		Ĺ	
CITY-ST-ZIP	NAPLES FL		14 CITY - ST	T - 7IP			
TiTLE	SD	☐ DELETE	21 THEE	i		Change Addition C	
NAME	PHILLIPS, NANCY		2.2 NAME	Į.			
STREET ADDRESS	3480 RUM ROW		2.3 STREE1	ADDRESS			
CITY-ST-ZIP	NAPLES FL		2.4 CITY - S	31 - 7IP			
TITLE		DLIETE	3.1 7/11 [Change Addition	
NAME			3.2 NAM1				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - S	31 - 71 ⁵			
TITLE		☐ DELETE	4111111			Change Addition	
NAME			4 2 NAME				
STREET ADDRESS			4.3 \$1R[F]	ADDRESS			
CITY-ST-ZIP			4.4 CHY-S	[- 7₁P			
TITLE	<u> </u>	DECETE	5.1 Talk			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5/3 \$1BEE1	ADDRESS			
CITY-ST-ZIP			5.4 Cily - S1				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME	1			
· -				*CODDE CC			
STREET ADDRESS			6.3 STREET.	·			
CITY-ST-ZIP	<u> </u>	. Surress of the control of the cont	6.4 CHY-S1	1 - / P	C. C		

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 of supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the corporation of 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 Blo 73 13 if changes of on an ayaching it with an address.

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