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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 633132

(6)

RILLIOY INCORPORATED

FILED Apr 24 1997 8:00am Secretary of State

Principal Place		Mailing Address			
4556 TAMIAMI TRAIL N. NAPLES FL 33940		4556 TAMIAMI TRAIL N. NAPLES FL 34103-3000			
				3. Date Incorporated or Qualifie 08/17/1979	od 3a. Date of Last Report 03/13/1996
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 45	56 Tamiami Tr	. 106		59-1931204	Not Applicable
Suite, Apt : 22	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stats		City & State	Asserted to the States of the	6. Election Campaign Financing	
23	aples, FL	28		Trust Fund Contribution	Added to Fees
Zip :2. [1	Country	Zip	Country	·	for intangible tax under s. 199.032,
24 341	9. Name and Address of Curre		30]	Florida Statutes 10. Name and Address of New	X Yes No
VEGI	ER, WILLIAM R.	iii nagistered Agent	81 Name	1/ 1/ > AA	Adjistered Agent
	ER, WILLIAM R. TAMIAMI TRAIL N.			Kelly D. Illa	conald
	ES FL 33940		82 Street Ad	dress (P.O. Box Number is Not Accept	otable)
1470 6	2012 30040		83	330 1 471114111	11.00
			1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		los Librordo
			84 City	Naples	FL SIP Code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above named co	orporation sulfmits this statement for the ration's board of directors. I hereby ac	ne purpose of changing its registered
office or re agent. Lar	egistered agent, or both, in the State in familiar with, and accept the oblig	e of Florida. Such change was ai gations of, Section 607.0505∡Flor	uthorized by the corpor rida Statutes.	ration's board of directors. I hereby ac	cept the appointment as registered
					// / / / / / / / / / / / / / / / / / /
SIGNIATION	KAUN ID. M	ur Donald Com	inerikalla 0	Maritinale	9/18/97
SIGNATURE	Signarure, typed as printigh name of registered as	uc. Donald (NOTE	Registered Agent signature rec	quired when reinstating)	9/18/9 (
SIGNATURE	Signarare typed or proton national registered and OFFICERS AN	gent and tilloid applicable (NOTE	Registered Agent signature red	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE	Signature typed or printing name of registered at OFFICERS AN	uc. Donald (NOTE	Registered Agent signisture rec 13.	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE NAME	Signaria o principi nana Diregistrico a: OFFICERS AN PT KESLER, JOYCE B.	gent and tilloid applicable (NOTE	Rogisteréo Xoent agritude rec 13. 1.1 TITLE 1.2 NAME	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE NAME STREET ADDRESS	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N.	gent and tilloid applicable (NOTE	Figure Agent sign from rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-YIP	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL	gent and the if applicable (NOTE) ND DIRECTORS DELETE	Registered Agent signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-7/P THE	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL	gent and tilloid applicable (NOTE	Registered Agent significative rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - ST - ZiP 2.1 TiTLE	quired when reinstating)	9/18/9 (
SIGNATURE 12. THE NAME SPREEL ADDRESS CHY-SI-ZP THE NAME	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL VP KESLER, WILLIAM R	gent and the if applicable (NOTE) ND DIRECTORS DELETE	Registered Agent sign/hunk red 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	quired when reinstating)	9/18/9 (
SIGNATURE 12. DILE NAME SIREST ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL VP KESLER, WILLIAM R 4556 TAMIAMI TRAIL N.	gent and the if applicable (NOTE) ND DIRECTORS DELETE	Registered Agent sign/hunk red 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	quired when reinstating)	9/18/9 (
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SIGNATURE 12. TOLE NAME STREEL ADDRESS OTY-ST-70P TOLE NAME STREEL ADDRESS G-TY-ST-70P TOLE	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL VP KESLER, WILLIAM R 4556 TAMIAMI TRAIL N. NAPLES FL VP KESLER, WILLIAM R 4556 TAMIAMI TRAIL N. NAPLES FL	gent and the if applicable (NOTE) ND DIRECTORS DELETE	Register & Agent sign/hunk red 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	quired when reinstating)	TOTE FICERS AND DIRECTORS IN 12 PA Change
SIGNATURE 12. DILE NAME SPEEL ADDRESS OLY-SL-7/P TITLE NAME STREET ADDRESS E-D-SL-7/P	PT KESLER, JOYCE B. 4556 TAMIAMI TRAIL N. NAPLES FL VP KESLER, WILLIAM R 4556 TAMIAMI TRAIL N. NAPLES FL NAPLES FL NAPLES FL NAPLES FL	peru and tillo il applicable (NOTE ND DIRECTORS DELETE	Rogisteréo Agent sign/hunk rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	quired when reinstating)	TOTE FICERS AND DIRECTORS IN 12 PA Change
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Tam an efficer 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.