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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # 639235

(1)

FILED	
May 02 1997 8:00	am
Secretary of Stat	e

Principal Plac 3001 N TAMIAN SUITE 206 NAPLES FL 331	JI TRAIL	Mailing Address 3001 N TAMIAMI TRAIL SUITE 208 NAPLES FL 34103-4172	·		1276						
US		US				3.	 Date Incorpora 10/10/1979 	ited or Qualifie		ate of Last F /23/1996	Report
2. Principal P	Place of Business	2a. Mailing Address	<u></u>			4	. FEI Number		1 04/		pplied For
2436 43rd Street SW		26 2436 43rd Street SW			59-1939985				ot Applicable		
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5.	. Certificate of S	tatus Desired	, Q	4	Additional equired
City & Stat		City & State				6.	. Election Camp	aign Financing		\$5.00	May Be
Naple		28 Naples, FI					Trust Fund Co				to Fees
- Zφ ⊒ 2411 <i>c</i> .	Country	^{Zip} 34116		ountry COT:	LIER	8.	. This corporation			e tax under s No	s. 19 9.032,
4 34116	9. Name and Address of Curren		30	T		10	Florida Statute Name and Ad				
QTE:	WART, JAMES C. JR.	N Hogistored Mgo(It		81	Name	10	. Hallo and Au	01080 () 11011	· rogiotoreo	- Hguit	
	S ISLE OF CAPRI ROAD, SUITE	104								· · · · · · · · · · · · · · · · · · ·	
	PLAZA	100		82 Street Ad		Address (F	P.O. Box Numbe	r is Not Accep	otable)	e)	
	DEN GATE FL 33999			83					***************************************		
										Last mi	
				84	City				F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stati	utes, the	above	-named	corporation	on submits this s	tatement for th	e purpose	of changing	ts registered
office or r	registered agent, or both, in the state	of Florida, Such change was	authoriza	ed by	the corp	oration's	board of directo	rs, t hereby ac	cept the ap	pointment as	registered
	to the provisions of Sections 607 050 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida Such change was ations of, Section 607.0505, F	s authoriza Florida Sta	ed by atutes	the corp	oration's	board of directo	rs. 1 hereby ac	cept the ap	pointment as	: /oa
								rs, t hereby ac		04/25	6/97
SIGNATURE	Signature typed or printed name of registered ago			reo Age		required whe			DATE	04/25	5/97
SIGNATURE	Signetize: Typest or printed name of registered ago OFFICERS AN	ert and title if applicable. (NC	OTE: Register	reo Age		required whe	n reinstating)		DATE	04/25	797 RS IN 12
SIGNATURE 12. UILE	Signeye year or printed name of registered ago OFFICERS AN PTD SMITH, CHARLES F JR	era and title if applicable. (NO DINECTORS	OTE: Register	red Age		required whe	n reinstating)		DATE	04/25 ID DIRECTO	797 RS IN 12
SIGNATURE 12. TILE NAME	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW	era and title if applicable. (NO DINECTORS	13 1.1	red Age), TITLE NAME		required whe	n reinstating)		DATE	04/25 ID DIRECTO	797 RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL	ort and title if applicable. (NC D DIRECTORS	13 1.1 1.2	red Age), TITLE NAME	nt signature i	required whe	n reinstating)		DATE	04/25 ID DIRECTO Change	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-SI-74	Significate typest or printed name of registarial ago OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD	era and title if applicable. (NO DINECTORS	13 1.1 1.2 1.3 1.4	red Age), TITLE NAME STREET	nt signature i	required whe	n reinstating)		DATE	04/25 ID DIRECTO	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS CITY-SI-74*	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R	ort and title if applicable. (NC D DIRECTORS	DTE: Register 13 1.1 1.2 1.3 1.4 2.1	red Age TITLE NAME STREET CITY-S	nt signature i	required whe	n reinstating)		DATE	04/25 ID DIRECTO Change	RS IN 12
SIGNATURE 12. UILF NAME STREET ADDRESS CITY-SI-7P UILF NAME	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT	ort and title if applicable. (NC D DIRECTORS	13 1.1 1.2 1.3 1.4 2.1 2.2	TITLE NAME STREET CITY-S TITLE	nt signature i	required whe	n reinstating)		DATE	04/25 ID DIRECTO Change	RS IN 12
SIGNATURE 12. WILE NAME STREEL ADDRESS CITY-SI-749 HILE NAME STREEL ADDRESS CITY-SI-749	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL	D DIRECTORS DELETE	DTE Register 13 1.1: 1.2: 1.3: 1.4 2.1: 2.2: 2.3: 2.4	TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS 1-ZIP	required whe	n reinstating)		DATE	04/25 ID DIRECTO Change Change	RS IN 12 ☐ Addition ☐ Addition
SIGNATURE 12. WILE NAME SIREELADDRESS CITY-S1-749 THLE NAME STREELADDRESS CITY-S1-749 THLE	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2438 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV	ort and title if applicable. (NC D DIRECTORS	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE TITLE TITLE TITLE TITLE	ADDRESS 1-ZIP	required whe	n reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change	RS IN 12
SIGNATURE 12. WILF NAME STREEL ADDRESS CITY-ST-7P THLE NAME STREEL ADDRESS C-1Y-ST-7P THLE NAME	PTD SMITH, CHARLES F JR 2438 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J.	D DIRECTORS DELETE	DTE Register 13 1.1: 1.2: 1.3: 1.4: 2.1: 2.2: 2.3: 2.4. 3.1: 3.2:	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE LITTLE	ADDRESS T-ZIP ADDRESS ST-ZIP	SVD	n reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 ☐ Addition ☐ Addition
SIGNATURE 12. THE NAME STREEL ADDRESS CITY-SL-ZP THE NAME STREEL ADDRESS C-TY-SL-ZP THE NAME STREEL ADDRESS STREEL ADDRESS	OFFICERS AN OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW	D DIRECTORS DELETE	DTE Register 13 1.1. 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.2	ITTLE NAME STREET NAME STREET NAME STREET CITY-S TITLE NAME STREET NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition
SIGNATURE 12. THE NAME STREEL ADDRESS CITY-SL-ZP THE NAME STREEL ADDRESS C-TY-SL-ZP THE NAME STREEL ADDRESS C-TY-SL-ZP THE STREEL ADDRESS C-TY-SL-ZP	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4	TITLE NAME STREET CITY-S TITLE NAME STREET I CITY-S STREET CITY-S CITY-S CITY-S CITY-S CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	SVD SMIT 2436	n reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. THEF NAME STREEL ADDRESS CITY-SL-7P THEE NAME STREEL ADDRESS CITY-SL-7P THEE NAME STREEL ADDRESS CITY-SL-7P THEE THEE THEEL ADDRESS CITY-SL-7P THEE	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL	D DIRECTORS DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1	TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET CITY-S TITLE NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. THEF NAME STREET ADDRESS CITY-SI-7P THEE NAME STREET ADDRESS CITY-SI-7P THEE NAME STREET ADDRESS CITY-SI-7P THEE NAME	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.4 4.1 4.2	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET LCITY-S TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-7P THE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.4 4.1 4.2 4.3	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET LCITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-7P THE STREET ADDRESS CITY-ST-7P THE STREET ADDRESS CITY-ST-7P	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.4 4.1 4.2 4.3 4.4	TITLE NAME STREET CITY-S TITLE NAME CITY-S CITY-S CITY-S CITY-S CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	04/25 ID DIRECTO Change Change	RS IN 12 Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-7P THE STREET ADDRESS CITY-ST-7P THE	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.2 4.3 4.4 5.1 5.1	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 12. TOTLE NAME STREET ADDRESS CITY-ST-7P TOTLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME STREET ADDRESS CITY-ST-7P TITLE NAME NAME NAME NAME NAME	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.4 4.1 4.2 4.3 4.4 5.1 5.2	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 12. 1011 STREET ADDRESS CHY-ST-7P 1011 STREET ADDRESS CHY-ST-7P 1011 NAME STREET ADDRESS CHY-ST-7P 1011 STREET ADDRESS CHY-ST-7P 1011 STREET ADDRESS CHY-ST-7P 1011 STREET ADDRESS CHY-ST-7P 1011 STREET ADDRESS STREET ADDRESS	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.1 5.1 5.2 5.3	TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 12. TUTLE NAME STREET ADDRESS CITY-ST-7P	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE	DTE Register 13 1.1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-7P THE	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.1 4.2 4.3 4.1 5.1 5.2 5.3 5.4 6.1	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET NAME CITY-S TITLE NAME CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition
Office of Lagont La SIGNATURE 12. DILF NAME STREEL ADDRESS CITY-ST-7P TITLE NAME STREEL ADDRESS	OFFICERS AN PTD SMITH, CHARLES F JR 2436 43RD STREET SW GOLDEN GATE FL VD SALLY, JOHN R 340 DEVIL'S BIGHT NAPLES FL SV SMITH, BETTY J. 2436 43RD STREET, SW GOLDEN GATE FL V RALPH E CARTER 625 MOORING LINE DRIVE	D DIRECTORS DELETE DELETE DELETE DELETE	DTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 5.1 5.2 5.3 5.4 6.1 6.2	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET LITLE NAME STREET CITY-S TITLE NAME STREET NAME NAME STREET NAME NAME NAME NAME NAME NAME NAME NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	SVD SMIT 2436	reinstating) ADDITIONS/CH	ANGES TO OF	DATE	O4/25 ID DIRECTO Change Change Change Change	RS IN 12 Addition Addition Addition Addition

4. 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 eath; 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:

THE ON PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

941-348-0589