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CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 20 PM 1:46

DOCUMENT # 645913 (5)

1. Corporation Name
ESTERO BAY PROPERTIES, INC.

Principal Place of Business	Mailing Address
7401 ESTERO BLVD. P.O. BOX 2459 FORT MYERS BEACH FL 33931	7401 ESTERO BLVD. P.O. BOX 2459 FORT MYERS BEACH FL 33931

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/20/1979
3a. Date of Last Report: 01/24/1994

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) — Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) — Country (30)

4. FEI Number: 59-1998675 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TAYLOR, KITTY
13741 DOWNING LANE Q-2
FORT MYERS FL 33919

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (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		☐ Change ☐ Addition
NAME	TAYLOR, KITTY	1.2 NAME		
STREET ADDRESS	13741 DOWNING LN Q-2	1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL	1.4 CITY-ST-ZIP		
TITLE	VPD	2.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, MICHAEL F.	2.2 NAME		
STREET ADDRESS	% BAY BEACH, 7401 ESTERD BLVD	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS BEACH FL	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	HAKIM, JOSEPH	3.2 NAME		
STREET ADDRESS	% BAY BEACH, 7401 ESTERD BLVD.	3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS BEACH FL	3.4 CITY-ST-ZIP		
TITLE	ST	4.1 TITLE		☒ Change ☐ Addition
NAME	TAYLOR, JACKY	4.2 NAME	TAYLOR, JACKIY E.	
STREET ADDRESS	1079 SOUTHDALE RD.	4.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL	4.4 CITY-ST-ZIP		
TITLE	AVP	5.1 TITLE		☐ Change ☐ Addition
NAME	LAMBERT, NANCY	5.2 NAME		
STREET ADDRESS	210 ESTRELITA ST.	5.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
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 is voluntarily furnished and 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 above, or on an attachment with an address.

SIGNATURE: Kitty Taylor KITTY TAYLOR PRESIDENT 1/16/95 813-463-4432
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

0481412 FP