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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

# 660085

(2)

CONTIN	NENTAL DEVELOPER & CO	NVERSIONS, INC	). ).						
Principal Place	e of Business	Mailing Address					Att Attick alait atait	B  B      B	
NAPLES FL 34103 700 11TH			steven e. Clark. CPA 1th st. so. #PH 3 Es FL <del>-83910 -</del>			DO NOT WRITE IN THIS SPACE			
•••		US			3. Date incorporated or	Qualified			
					03/21/1980				
2. Principal P	lace of Business	2a. Mailing Addr	98\$		4, FEI Number		<del></del>	plied For	
21		26			59-1993849			t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.		5. Certificate of Status D	esired	\$8.75 A		
City & State	е	City & State			6. Election Campaign Fir		\$5.00		
23		28		.,	Trust Fund Contribution		Added t		
Zip	Country	Ζιρ		untry	<ol><li>This corporation owes</li></ol>				
24	25	29 34103	30		Personal Property Tax			J No	
	9. Name and Address of Curren	nt Registered Agent		04   11	10. Name and Address	New Hegistere	a Agent		
Wodunger, Stephen R.				81 Name	Steven EC	lack, (	1 Pa_		
134	i <b>TUPEÌQ∕</b> RD.		82 Stre		Address (P.O. Box Number is No	: Acceptable?	_ •		
NA	PLES 62 33963				100 11-24.5	<u>, #PH</u>	3		
	/ )			83					
	•			84 City	Daples	F	L 85 Zip (	Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florid	a Statutes, the	above-named	corporation submits this stateme	nt for the purpose	of changing it	s registered	
office or r	egistered agent, or both, in the State im familiar with, and accept the obligi	of Florida, Such chan	ae was authoriz	ed by the cor	poration's board of directors. I he	eby accept the a	ppointment as	registered	
	-10. ECO.	Q CPA	0000, 7101104 01	3.0.00		4-2	3-98		
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable	(NOTE: Registe	ed Agent signature	e required when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS	13		ADDITIONS/CHANGES	TO OFFICERS A			
TITLE	PD	☐ DE	LETE 1.1	TITLE			Change	Addition	
NAME	Wodlinger, Stephen R		1.2	NAME					
STREET ADDRESS	134 TUPELO RD.		1.3	STREET ADDRESS					
CITY-ST-ZIP	NAPLES FL		1.4	CITY-ST-ZIP					
TITLE		☐ DE	LETE 2.1	TITLE	<u> </u>	_	Change	Addition	
NAME			22	NAME	Steven E CI	ark . O.	20		
STREET ADDRESS			23	STREET ADDRESS	700 11+25.5	# DUS	,1" [		
CITY-ST-2IP			2.4	CITY-ST-ZIP	Steven E CI 706 11+754.5 Naples, 9L	34103			
TITLE		□ DE	LETE 3.1	TITLE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Change	Addition	
NAME			3.2	NAME	1				
STREET ADDRESS			3.3	STREET ADDRESS					
CITY-ST-ZIP			3.4	CITY-ST-ZIP					
TITLE		☐ DI	LETE 4.1	TITLE			Change	Addition	
NAME			4. 2	NAME					
STREET ADDRESS			4.3	STREET ADDRESS	1				
CITY-ST-ZIP			4.4	CITY-ST-ZIP		_			
TITLE		☐ Di	LETE 5.1	TITLE		•	Change	Addition	
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET ADDRESS				į	
CITY-ST-ZIP			5.4	CITY-ST-ZIP					
TITLE		Di	LETE 6.1	TITLE			☐ Change	☐ Addition	
NAME			6.2	NAME					

14. I 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 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.

6.4 CITY-ST-ZIP

1A- C CO 0:00A

(0)3-98 (ou)361-802-3

**FILED** 

Apr 30 1998 8:00am

Secretary of State