

FILE NOW: FILING FEE IS \$61.25

FILED
May 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **728733** (7)

1. Corporation Name
NAPLES MARINER, INC.

Principal Place of Business 1295 GULF SHORE BOULEVARD SOUTH NAPLES FL 34102	Mailing Address 1295 GULF SHORE BOULEVARD SOUTH NAPLES FL 34102
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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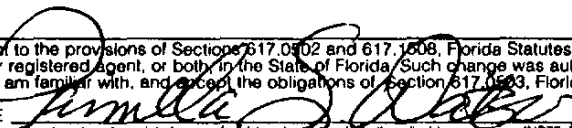
3. Date Incorporated or Qualified 02/05/1974	4. FEI Number 59-1541943	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent
**INGRAM, LARRY M
900 SIXTH AVENUE SOUTH SUITE 302
NAPLES FL 34102**

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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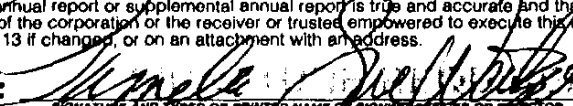
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	WATSON, EDWIN SR
STREET ADDRESS	1295 GULF SHORE BLVD S
CITY-ST-ZIP	NAPLES FL 34102
TITLE	STD
NAME	WATSON, DORCAS H
STREET ADDRESS	1295 GULF SHORE BLVD S
CITY-ST-ZIP	NAPLES FL 34102
TITLE	D
NAME	WATSON, GORDON
STREET ADDRESS	463 17TH AVENUE SOUTH
CITY-ST-ZIP	NAPLES FL 34102
TITLE	VD
NAME	AUSTIN, CAROL
STREET ADDRESS	90 DUBLIN AVE
CITY-ST-ZIP	NASHUA NH
TITLE	D
NAME	BRAND, AGNES
STREET ADDRESS	19 RICHMAN RD.
CITY-ST-ZIP	JACKSON SPRINGS NC
TITLE	D
NAME	WATSON, PAMELA
STREET ADDRESS	463 17TH AVENUE SOUTH
CITY-ST-ZIP	NAPLES FL 34102

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

CR2E037 (10/97)