PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90185 027 ***158.75

DOCUMENT # 820037

LELY DEVELOPMENT CORPORATION								
Principal Place of Business								
8825 TAMIAMI TRAIL EAST NAPLES FL 33962		8825 TAMIAMI TRAIL EAST NAPLES FL 33962		DO NOT WRITE IN THIS SPACE				
				3. Date incorporated or Qualified 11/04/1966				
2. Principal Place of Busines	is 2	a. Mailing Address		4. FEI Number				
21	20	6		59-1148037				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired \$8				
22 City & State 23	21	City & State		6. Election Campaign Financing Trust Fund Contribution A				
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax.				
	nd Address of Current Reg		<u> </u>	10. Name and Address of New Registered Agent				
VEGA, GEORGE	in transport of Antique tras		81 Name	Ideass (P.O. Boy Number is Not Acceptable)				

	•

Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

☐ Yes

□No

	DO NO	WKIII	± IN	IHIS	SPAC
ncorpo	prated or Qua	alifed			

2660 AIRPORT RD		82	Street Address (P.O. Box Number is Not Acceptable)						
Napi	LES FL 33962	83				_			
,	5430 PT.	84	City	FL.		Zip Co	•		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg	istand Asen	elonatura ra	DATE			\		
12.	OFFICERS AND DIRECTORS	13.	select regard agriculter required more remodulity						
TITLE	PD DELETE	1,1 TITLE			☐ Cha		☐ Addition		
NAME .	DE LANGE, LUKE	12 NAME							
	8825 TAMIAMI TRAIL EAST	1.3 STREET	ADDRESS						
STREET ADDRESS	NAPLES FL 33962	1.4 CITY-ST							
CITY-ST-ZIP Title	V DELETE	2.1 TITLE	-		☐ Cha	ange	Addition		
NAME *	BRASETH, ROBERT	2.2 NAME							
STREET ADDRESS	5010 SAXONY COURT	2.3 STREET	ADDRESS						
	CAPE CORAL FL	2. 4 CITY-S	-	the second second					
CITY-ST-ZIP TITLE	D DELETE	3.1 TITLE			☐ Chi	ange	☐ Addition		
NAME	BOOM, JORIS	3.2 NAME							
STREET ADDRESS	BUTZENWEG 20	3.3 STREET	ADDRESS						
CITY-ST-ZIP	ZUG, SWITZERLAND	3,4, CITY-S	- 1						
TITLE	D DELETE	4.1 TITLE			Chi	ange	☐ Addition		
NAME .	VAN DER LELY, OLAF	4.2 NAME	-						
STREET ADDRESS	BUTZENWEG 20	4.3 STREET	ADDRESS						
CITY-ST-ZIP	ZUG. SWITZERLAND	4.4 CITY-ST	-ZIP						
TITLE	OST DELETE	5.1 TITLE			Ch	ange	☐ Addition		
NAME :	VAN DER LELY RONALD	5.2 NAME			•		1		
STREET ADDRESS	BUTZENWEG 20	5.3 STREET	ADDRESS						
CITY+ST-ZIP	ZUG SW	5.4 CITY-ST	-ZIP						
TITLE	DELETE	6.1 TITLE			Chi	ange	Addition		
NAME	States I at the one of	6.2 NAME							
STREET ADDRESS	The state of the s	6.3 STREET	ADDRESS				;		
CITY-ST-ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NING OFFICER OR DIRECTOR