

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F10478

FILED
Apr 22, 2002 8:00 AM
Secretary of State

Entity Name: BK NAPLES, INC.

Current Principal Place of Business:

1100 5TH AVE SO.
201
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1100 5TH AVE SO
201
NAPLES, FL 33940 US

New Mailing Address:

1100 5TH AVE SO
201
NAPLES, FL 34102 US

FEI Number: 59-2042831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
% SHUTTS & BOWEN
201 S BISCAYNE BLVD
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: DE ARMAS, LUIS L.
Address: 201 SOUTH BISCAYNE BLVD
City-St-Zip: MIAMI, FL 0,

Title: PTD () Delete
Name: WANKLYN, JOHN A.
Address: 1100 5TH AVE. SO. STE #201
City-St-Zip: NAPLES, FL

Title: S () Delete
Name: JOHNSON, DEBBIE
Address: 4437 18TH AVE SW
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TRACY, VICTORIA A
Address: 3266 LAKEVIEW DRIVE
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A WANKLYN

P

04/22/2002

Electronic Signature of Signing Officer or Director

Date