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

PROFIT CORPORATION ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

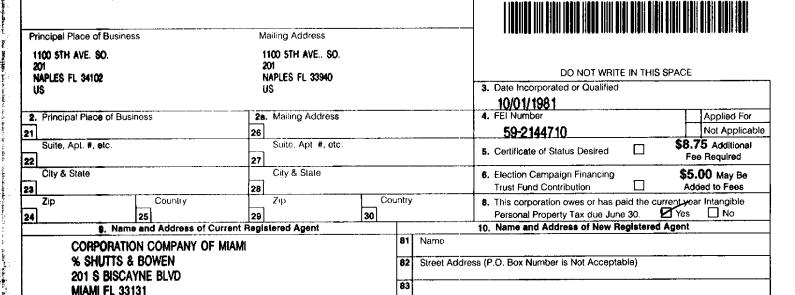
DOCUMENT # F47234

(2)

MCALPINE (IMMOKALEE ROAD), INC.

## FILED May 06 1998 8:00am Secretary of State

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	Signature, typicd or crimted name of legistered agent and site 4 applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12,	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	\$D	DELETE	1.1 TITLE	Change Addition
NAME	CONNOR, SYLVIA		1.2 NAME	
STREET ADDRESS	7505 SAN MIQUEL WAY		1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL		1.4 City - St - ZIP	
TITLE	PTO	DELETE	2.1 TITLE	Change Addition
NAME	WANKLYN, JOHN A.		2.2 NAME	
STREET ADDRESS	1100 5TH AVE. SO. # 201		2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL		2. 4 CITY - ST - ZIP	
TITLE	AS	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DEPAUW, ANJA		3.2 NAME	
STREET ADDRESS	4921 22ND AVE SW		3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL		3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4 4 CITY - ST - ZIP	
TITLE		☐ DELETE	51 TITLE	Change Addition
NAME			5 2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TRILE	Change Addition
NAME			62 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-7IP			64 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 disciplinary or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an altagraphient with an address.

1-78-98 QUILUG-TUK