## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002193 (1)

## FOUR CORNERS DEVELOPMENT INCORPORATED

APPROVED AND FILED

1997 SEP 23 PM 1: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business 4760 S CLEVELAND AVE FT. MYERS FL 33907			Mailing Address 4760 S CLEVELAND AVE FT. MYERS FL 33907						1 10002000 FARM ONION 2012 00111 30111 7	))  <b>     </b>	I IANDA IIAIA I	DING IRII IN I	
									DO NOT WRITE IN THIS SPACE				
									3. Date Incorporated or Qualified	3a. Da	ate of Last	Report	
O Delegate at 0	Na a of Charles							05/12/1993	03/	15/1996		_	
2. Principal Place of Business			2a. Mailing Address						4. FE ( Number		<b>→</b>	Applied For	-
Suite, Apt. #, etc.			26 Suite, Apt. #, etc.						76-0391438			Not Applicable	e
22			27						5. Certificate of Status Desired			Additional Required	
City & State			City & State						6. Election Campaign Financing			0 Мау Ве	$\dashv$
23			28						Trust Fund Contribution			o may be d to Fees	
Zip Country		ntry	Z <sub>I</sub> p Cou			ntry		8. This corporation owes or has paid the current year					٦
24 25			29 30					Personal Property Tax due June 30. Yes				□No	
	9. Name and Add	dress of Current	Registered	Agent		ļ,			10. Name and Address of New R	egistered	Agent		
SAF	RAN, BALKAR					61	Name						
	o S. Cleveland A			82	Street	et Address (P.O. Box Number is Not Acceptable)					$\dashv$		
FT.	MYERS FL 33907											_	
						83							
						84	City			P= 1	85 Zij	Code	-
11 Directions	to the provisions of C	actions CO7 OLOS	and 607 150	Q. Elecido Ctot	dee the el				ration submits this statement for the	FL		<del>(2 </del>	4
l office or i	registereg agent, er b	oth, in the State of	Horida Suc	ch change was	-authorize	d hv	the corr	poration	ration submits this statement for the n's board of directors. I hereby acce	purpose of pt the app	i changing iointment a	its registered is registered	1
agent. I a	ım <b>lam</b> iliar with, and a	scept the obligati	ons of, Secti	on 607.0505, F	lorida Stat	utes	<b>S</b> .		•			· ·	
SIGNATURE	Signature typed or printed o	same of two sterred arrests	and title diamone	abic (NC	H : Benisten	d Apr	nt sionature	required	when reinstating)	DATE			.
12		OFFICERS AND			13.		- Barana c	- Icquire	ADDITIONS/CHANGES TO OFFI		DIRECTO	PRS IN 12	$\dashv_i$
TITLE	DCP			DELFTE	1.1 1	ILE					Change		n
NAME	CHANAL, JASWA	ANT S MR			1.2 N/	AME			7000023	::::::::::::::::::::::::::::::::::::::	117	1	
STREET ADDRESS	4760 S CLEVEL	ND AVE			1.3 \$1	REET	ADDRESS		-09/23/	9701	091	001	
CFTY-ST-ZIP	FT. MYERS FL 3	3907			1.4 CI	1Y - \$	T-71P		****551	0.00	非非常来员	50.00	
TITLE	DSM			☐ DELETE	2.1 %	ILξ					Change	Addition	n j
NAME	Balkar Saran				2.2 N	ME		1	7000023	រោង	417	1	
STREET ADDRESS	4760 S CLEVEL				2.3 S1	REFT	ADDRESS		7000023 -09/23/	9701	091	002 🔭	
CITY-ST-ZIP	FT. MYERS FL 3	3907			2.4 C		T - ZIP	<b>.</b>	******	75	***	(9. 70)	
TITLE	DT			DETETE	3.1 TI					_	L_  Change	** [ Aildition	n
NAME	GILL, JASBIR S				3.2 N/								
STREET ADDRESS	4760 S CLEVEL						ADDRESS						
CITY-ST-ZIP TITLE	FT. MYERS FL 3	3907		DELETE	3.4. C		1 · 7(P	ļ				6.4.000	_
NAME				FT pricit	411)			}			☐ Change	Addition	"
i					4.2 N		topproc						
STREET ADDRESS City-St-Zip							ADDRESS						
TITLE				DELFTE	4.4 CI 5.1 1F		1 - C)t'				Change	Addition	<del>,  </del>
NAME					5.2 N/						CT CHOING		"
STREET ADDRESS							ADDRESS					_	
CITY-ST-ZIP					5.4 CI							$\bigcap_{i=1}^{n}$	
TITLE				DELETE	6.1 TI			<u> </u>		<del> </del>	Change	Additid	$\exists$
NAME					6.2 NA	ME					al.	y par	
STREET ADDRESS					6.3 \$TREE						_1112	nb '	
CITY-ST-7IP						1v. 61					$\mathcal{O}$	10	

14. I do heroby 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 eath; 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.

-----

D. W. C. STALLING IN CHEE

441-275-1111