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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 MAY 15 PM 2:40

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F94000003611 (0)

1. Corporation Name

NEW RIVER DEVELOPMENT CO., INC.

Principal Place of Business

18551 N TAMiami TR.
NORTH FORT MYERS FL 33903

Mailing Address

18551 N TAMiami TR.
NORTH FORT MYERS FL 33903-7301

3. Date Incorporated or Qualified

07/11/1994

3a. Date of Last Report

03/21/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0498673

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WAGLE, HAROLD H
18551 N TAMiami TRAIL
NORTH FORT MYERS FL 33903

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
C	ELLIOTT, RAYMOND H	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input checked="" type="checkbox"/>
CP	KANAVOS, PETER J JR.	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input type="checkbox"/>
D	KAHLE, BEAT	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input type="checkbox"/>
D	BRUNE, MARK	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input type="checkbox"/>
V	WAGLE, HAROLD H	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input checked="" type="checkbox"/>
V	KANAVOS, PAUL C	18551 N. TAMiami TR.	NORTH FORT MYERS FL 33903	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
Vice President	Mark D. Kanavos	18551 N. Tamiami Trail	North Fort Myers, FL 33903	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

4/28/97

941-731-2700

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