## 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 # 1. Corporation Name F96000006748 (5)

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

25

1201 HAYS STREET

TALLAHASSEE FL 32301

BLACK ISLE, INC.

Principal Place of Business 28000 SPANISH WELLS BLVD BONITA SPRINGS FL 33923-6686

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

28

29

28000 SPANISH WELLS BLVD BONITA SPRINGS FL 33923-6686

## **FILED** Feb 05 1998 8:00am Secretary of State



☐ Yes

8. This corporation owes or has paid the current year Intaggible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

ZINO

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

12/24/1996

65-0712130

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

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

4. FE! Number

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			84 City		FL 85 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, typed or printed name of registered agent and title if applicable, (NOTE. Registered Agent signature required when reinstating)  DATE  DATE						
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PCD	DELETE	1.1 TITLE		Change	Addition
NAME	MCARDLE, DAVID A		1.2 NAME			1
STREET ADDRESS	28000 SPANISH WELLS BLVD		1.3 STREET ADDRESS			
City-ST-ZiP	Bonita Springs FL		1.4 CITY-ST-ZIP			_
TITLE	VD	DELETE	2.1 TITLE		Change	Addition
NAME	SCARLATI JR, FRANK S		2.2 NAME			ĺ
STREET ADDRESS	28000 SPANISH WELLS BLVD		2.3 STREET ADDRESS			Ì
CITY-ST-ZIP	BONITA SPRINGS FL		2. 4 CITY-ST-ZIP			
TITLE	SD	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME	KELLY, THOMAS J		3.2 NAME			1
STREET ADDRESS	28000 SPANISH WELLS BLVD		3.3 STREET ADDRESS			
CITY-ST-ZIP	BONITA SPRINGS 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	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			1
CITY-ST-ZIP			5.4 CITY - ST- ZIP			
TITLE		□ DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			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.						

Country

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