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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G04730

(9)

THE BOARDWALK OF NAPLES, INC.

FILED										
Jun 16 19	97 8:00am									
Secretar	y of State									

Principal Place of Business 1200 FIFTH AVENUE SOUTH NAPLES FL 33940			Mailing Address 1200 FIFTH AVENUE SOUTH NAPLES FL 34102-6452									
								3. Date Incorporated or Qualified 10/18/1982		Date of Last R 3/25/1996	leport	
2. Principal Place of Business			2a. Mailing Address					4. FEI Number	1	_ \v_i	oplied For	
21			26					59-2227265			ot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired			
City & Sta	ite	27	City & State					6. Election Campaign Financing				
23		28	Chi, C Chair					Trust Fund Contribution		\$5.00 Added	may Be to Fees	
Zip	Country		Zip	Cou	intry	/		8. This corporation has liability for	or intangit			
24	25	29		30			Florida Statutes	Yes	☑ No			
	9, Name and Address of Curre	nt Regis	tered Agent			1		10. Name and Address of New I	Registere	d Agent		
	ROZENSKI, JOAN E				81	Na	me					
	8 WOODBINE CT.				82	Str	eot Addi	ress (P.O. Box Number is Not Accept	able)			
MAI	rco Island FL 33937				83	 						
					84	Cit	У		F	85 Zip (Code	
agent. I SIGNATURE	am familiar with, and accept the oblig	gations of	l, Section 607.0505, F	Torida Stat	tutes	S.	,	tion's board of directors. Thereby acc	DATE			
12,	OFFICERS AN	4D DIREC		13.				ADDITIONS/CHANGES TO OF	FICERS A			
TITLE	STD DODGENEY DODGEDT W		☐ DELETE 1.11							Change	Addition	
NAME STREET ADDRESS	DOROZENSKI, ROBERT W 1808 WOODBINE CT.			1.2 N			ree					
CITY-ST-ZIP	MARCO ISLAND FL					FADDR S1×Z(P	:55					
TITLE	PD		DELETE	2.1 7		31.71				☐ Change	Addition	
NAME	DOROZENSKI, JOAN E			2.2 N	AME							
STREET ADDRESS				2.3 \$1	REET	ADDR	ESS					
CITY-ST-ZIP	MARCO ISLAND FL			2.40	ITY - 9	\$1 - Z(P						
TATLE			☐ DELETE	3.1 10						Change	Addition	
NAME				3.2 N/		1.4655	F0C					
STREET ADDRESS						LADDR						
CITY-ST-ZIP TITLE	<u> </u>		DELETE	3.4. U		S1 - 71P				Change	Addition	
NAME			—	4. 2 N								
STREET ADDRESS						ADDR	ESS					
CITY-ST-ZIP						ST - 71P						
TITLE			☐ DELFTE	5.111	TEE					Change	Addition	
NAME				5 2 N/	AME							
STREET ADDRESS						AQQA I	£SS					
CITY-ST-ZIP			☐ DELETE			ST - ZIP				Channe	Addition	
TITLE	- 1. A		☐ DETE/IE	6111						Change	LT Acquiou	
NAME STREET ADDRESS	1			6.2 N/ 6.3 S1		I ADDR	166					
AUTHOR WANDINGS	i			0.00	,	1000						

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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 anual 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 trustoe empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 12 or Block 12 or on an attachment with an address