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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G15071

(5)

Mailing Address

EASTLAKE DEVELOPMENT COMPANY, INC.

FILED Apr 30 1997 8:00am Secretary of State

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% CHARLES C. BUNDSCHU, III 5900 ENTERPRISE PRKWY. FT.MYERS FL 33905		% CHARLES C. BUNDSCHU. III 5900 ENTERPRISE PRKWY. FT.MYERS FL 33905-5003				3. Date Incorporated or Qualified 12/17/1982		a. Date of Last Report 05/01/1996		
2. Principal Pl	2a. Mailing Address	ess			4. FEI Number	Applied For				
21		26			59-2296624	Not Applicable				
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required					
City & State		City & State			··	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	7ip 29	Gountry 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes X Yes No				
	9, Name and Address of Current	Registered Agent		81	Namo	10. Name and Address of New Reg	istered A	gent		
	DSCHU, CHARLES C., III			61	e					
5900 ENTERPRISE PRKWY. FT. MYERS FL 33905				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
				В3						
]	84	City		FL	85	Zip Co	ode
office or re agent. I an SIGNATURE	egistered agent, or both, in the State on mailiar with, and accept the obligation	of Florida. Such change was ions of, Section 607.0505, I	s authorized Florida Stati	d by utes	the corpora i.	poration submits this statement for the p ation's board of directors. I hereby accep	urpose of t the appo	chang pintmer	ing its	registered egistered
12.	Signature, typod or printed name of registered agen OFFICERS AND		OTF Registered	LAge	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDS AND	DIDEC	TARR	161.12
TITLE	VD OPPICENS AINE	DELETE	1.1 10	LE		ABBITTONS/CHANGES TO OFFIC		Cha		Addition
NAME	KRAFT, DAN		1.2 NA						-	
STREET ADDRESS	5900 ENTERPRISE PKWY		1.3 \$1	REFT	ADDRESS					
CITY-ST-ZIP	FT MYERS, FL 00000		14 CI	IY-S	1 · ZIP					33905
TITLE	PD			LE.				X Cha	inge	Addition
NAME	BUNDSCHU, CHARLES C III		2 2 NA							
STREET ADDRESS	5900 ENTERPRISE PKWY FT MYERS, FL 00000				ADDRESS					33905
CITY-ST-ZIP TITLE	STD	DELETE	2 4 CI 3.1 111		31 - 7IP			Cha	IDOP	33Y/O Addition
NAME	BUNDSCHU, GAYLE	L_) DECLE	3.1 III 3.2 NA					LOU LOUG	mys	L.J ADDITION
STREET ADDRESS	5900 ENTERPRISE PARKWAY				ADDRESS					
CITY-ST-ZIP	FT. MYERS FL		3.4. CI							33905
TITLE		DELETE	4.1 10					Cha	inge	Addition
NAME			4. 2 N	AME						
STREET ADORESS			4 3 ST	REF 1	ADDRESS					
CITY-ST-ZIP			4 4 CI		T-7IP					
TITLE		☐ DELETE	1	51 TITLE				Cha	inge	Addition
NAME			5.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE	5.4 CI		T - ZIP			Chá	1000	Addition
TITLE		<u> </u>	6.1 111					LLL UNG	mge	- Madilian
NAME CTOCCT ADDOCCC			6.2 N/		ADOBECC					
STREET ADDRESS					ADDRESS 7 710					

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 true certify 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 shanged, or on an attantiment with an address.

MATURE GOVE BUNK

4/9/92 94/-693-100