

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra R. Morse
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 25 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G46654** (1)
1. Corporation Name
NEW WEST BUILDING CORPORATION

Principal Place of Business

% RONALD J. DAVIS - CR
5061 2ND AVE SW
NAPLES FL 33999
US

Mailing Address

% RONALD J. DAVIS - CR
5061 2ND AVE SW
NAPLES FL 33999
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/28/1983** 3a. Date of Last Report **02/28/1994**

4. FEI Number **59-2305723** 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

2. Principal Place of Business 2a. Mailing Address
21 **5061 2ND AVE. S. W.** 26 **5061 2ND AVE. S. W.**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 City & State 27 City & State

23 **NAPLES, FL.** 28 **NAPLES, FL.**

24 Country 25 Zip 29 Country 30 Zip

24 **NA** 25 **COLLIER** 29 **COLLIER** 30 **COLLIER**

9. Name and Address of Current Registered Agent

DAVIS, RONALD J. SR.
5081 2ND AVENUE S.W.
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name **KATHLEEN M. DAVIS**
82 Street Address (P.O. Box Number is Not Acceptable)
83 **5061 2ND AVE. S. W.**
84 City **NAPLES,** 85 Zip Code **FL 33999**

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 *Kathleen M. Davis*

KATHLEEN M. DAVIS PRES.

APRIL 20, 1995

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **DAVIS, RONALD J SR** **DELETE**
STREET ADDRESS **5061 2ND AVE SW**
CITY - ST - ZIP **NAPLES, FL 00000**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRES., V. PRES. S/T** ☒ Change ☐ Addition
1.2 NAME **KATHLEEN M. DAVIS**
1.3 STREET ADDRESS **5061 2ND AVE. S. W.**
1.4 CITY - ST - ZIP **NAPLES, FL. 33999** ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 *Kathleen M. Davis* **KATHLEEN M. DAVIS, PRES. 4/20/95 813-455-3070**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Printed)