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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G52596

DEVELOPMENT & COMMERCIAL PROPERTIES, INC.

Principal Place	of Business	Mailing Address					
1640 PERIWINKLE WAY. STE. 5		1640 PERIWINKLE WAY, STE. 5					
PO BOX 134		PO BOX 134			DO NOT MIDITE IN	THIS SPACE	
SANIBEL ISLAND FL 33957		Sanibel Island FL 33957		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		ł
					08/03/1983		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	\	plied For
21		26		59-2309041		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	II.
22		27			Fee Rec	quired	
City & State		City & State		6. Election Campaign Financing	\$5.00		
23		28		Trust Fund Contribution	Added to	o Fees	
Zip Country Zip		Zip	Country		8. This corporation owes the current year		_
24	25 29 30		J		Personal Property Tax.		□No
	9. Name and Address of Curren	t Registered Agent		·	10. Name and Address of New Registe	red Agent	
			81	Name			
	DEUR, RICHARD J.			Stroot Add	ress (P.O. Box Number is Not Acceptable)		
1640	PERIWINKLE WAY	82		Street Addi	ress (F.O. Box Hamber is Not Acceptable)		ļ
SUIT	E 5		83				
Sanibel Island FL 33957							
			84	City		FL 85 Zip C	Code
11. Pursuant	to the provisions of Sections 607 050	2 and 607.1508. Florida Statutes.	the abov	e-named corp	poration submits this statement for the purpor	e of changing its	registered
office or re	egistered agent, or both, in the State	of Florida. Such change was author	onzea by	the corporati	on's board of directors. I hereby accept the a	ppointment as rec	gistered
agent. I ai	m familiar with, and accept the obliga	mons of, Section 607.0505, Fiorida	Statutes				i
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if annicable (NOTE: Rec	ustered Age	nt signature require	ed when reinstating) DAT	Ε	
12.	The state of the s		13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	BRODEUR, JUDY K.		1.2 NAME				į.
1	987 SAND CASTLE ROAD			T ADDRESS			1
STREET ADDRESS	*						į
CITY-ST-ZIP	SANIBEL ISLAND FL	□ DELETE	1.4 CITY-S	1-217		Change	Addition
TITLE	SD	Ü pereie	2.1 TITLE			C) change	
NAME	BRODEUR, RICHARD J.		2.2 NAME	İ			}
STREET ADDRESS	987 SAND CASTLE ROAD		2.3 STREE	TADDRESS			1
CITY-ST-ZIP			2.4 CTY+	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME	ĺ			
STREET ADDRESS	RESS 3.33		3.3 STREE	TADDRESS			
CITY-ST-ZIP	34 (34 CITY-9	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME		i	4. 2 NAME				}
STREET ADDRESS			4.3 STREE	TADDRESS			l
			4.4 CITY- S	i			J
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		···	☐ Change	Addition
Į.			5.2 NAME			_ •	_
NAME				TADDRESS			
STREET ADDRESS			5.4 CITY-5				
CITY-ST-ZIP			6.1 TITLE)1-ZIP		[] Change	Addition
TITLE		(DELETE	6.1 MLC			∟ Onange	sudibori
NAME							
STREET ADDRESS			6.3 STREE	T ADDRESS			

SIGNATURE:

STREET ADDRESS 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, with all other like empowered.

FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90096 015 ***150.00

CR2E034 (11/98)