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FILED  
May 04 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H51552 (8)

1. Corporation Name  
WAVERLY DEVELOPMENT CORPORATION

Principal Place of Business

Mailing Address

405 FIFTH AVE. S.  
#6  
NAPLES FL 33940

405 FIFTH AVE. S.  
#6  
NAPLES FL 33940



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/10/1985

4. FEI Number

59-2518538

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 365 5th AVE S

Suite, Apt. #, etc.

22 201

City & State

23 NAPLES, FL

Zip

24 34102

Country

25 USA

2a. Mailing Address

26 365 5th AVE S

Suite, Apt. #, etc.

27 201

City & State

28 NAPLES, MA

Zip

29 34102

Country

30 USA

9. Name and Address of Current Registered Agent

ANTARAMIAN, JACK  
405 FIFTH AVE. S. #6  
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name

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

83

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

12. OFFICERS AND DIRECTORS

TITLE

PTD  
NAME  
ANTARAMIAN, JACK J.  
STREET ADDRESS  
3725 FORT CHARLES DR.  
CITY-ST-ZIP  
NAPLES FL

☐ DELETE

TITLE

D  
NAME  
LAPPEN, ELIOT  
STREET ADDRESS  
1087 BEACON STREET  
CITY-ST-ZIP  
NEWTON MA

☐ DELETE

TITLE

D  
NAME  
NASSIF, DAVID E.  
STREET ADDRESS  
167 WORCESTER STREET  
CITY-ST-ZIP  
WELLESLEY MA

☐ DELETE

TITLE

S  
NAME  
Weinstein, Robert W.  
STREET ADDRESS  
125 Summer St.  
CITY-ST-ZIP  
Boston, MA

☐ DELETE

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE

*[Signature]*

1/22/98 9:14 (134/16/98)

CR2E034 (10/97)