FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 1:21

DOCUMENT # H60332 (4)

1. Corporation Name
SAF DEVELOPMENT COMPANY OF NAMPLES, INC.

Principal Place of Business	Mailing Address
% EARL L. FRYE 3411 TAMIAMI TRAIL NORTH NAPLES FL 33940	% EARL L. FRYE 3411 TAMIAMI TRAIL NORTH NAPLES FL 33940

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/30/1985
3a. Date of Last Report: 04/19/1994

2. Principal Place of Business	2a. Mailing Address
21 180 Crown Drive	26 180 Crown Drive
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Naples, FL	28 City & State: Naples, FL
24 Zip: 33942 25 Country	29 Zip: 33942 30 Country

4. FEI Number: 59-2543704 ☐ 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

9. Name and Address of Current Registered Agent

FRYE, EARL L.
3411 TAMIAMI TRAIL NORTH
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 180 Crown Drive
83
84 City: FL 85 Zip Code: 33942

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: Earl L. Frye 4/26/95
Required if filing name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	PD	☒ Change ☐ Addition
NAME	FRYE, EARL L.	12 NAME	Frye, Earl L.	
STREET ADDRESS	3411 TAMIAMI TR N	13 STREET ADDRESS	180 Crown Drive	
CITY-ST-ZIP	NAPLES FL	14 CITY-ST-ZIP	Naples, FL 33942	
TITLE	ST	21 TITLE	ST	☒ Change ☐ Addition
NAME	FRYE, DAVID E.	22 NAME	Klecker, Elizabeth K.	
STREET ADDRESS	3411 TAMIAMI TRAIL NORTH	23 STREET ADDRESS	180 Crown Drive	
CITY-ST-ZIP	NAPLES FL	24 CITY-ST-ZIP	Naples, FL 33942	
TITLE	V	31 TITLE	V	☒ Change ☐ Addition
NAME	FRYE, SHIRLEY A.	32 NAME	Frye, Shirley A.	
STREET ADDRESS	3411 TAMIAMI TR., N.	33 STREET ADDRESS	180 Crown Drive	
CITY-ST-ZIP	NAPLES FL	34 CITY-ST-ZIP	Naples, FL 33942	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(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 above, or on an attachment with an address.

SIGNATURE: Earl L. Frye, President 4/26/95 (813) 566-8080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0327077 CP