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CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 4:16

DOCUMENT # **H65971** **(4)**

1. Corporation Name
PORT OF THE ISLANDS REALTY, INC.

Principal Place of Business	Mailing Address
25000 E TAMIAMI TRAIL NAPLES FL 33961 US	2500 E TAMIAMI TRAIL NAPLES FL 33961 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/11/1985
3a. Date of Last Report: 02/25/1994

2. Principal Place of Business
21: 156 Evenwyster Cay
22: Suite, Apt. #, etc.
23: City & State: NAPLES, FL
24: Zip: 33961 25: Country: US

2a. Mailing Address
26: 156 Evenwyster Cay
27: Suite, Apt. #, etc.
28: City & State: NAPLES, FL 33961
29: Zip: 33961 30: Country: US

4. FEI Number: 59-2565607 ☐ 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 emerging tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~BARNARD, THOMAS L~~
~~25000 E. TAMIAMI TRAIL~~
~~NAPLES FL 33961~~

MARY MARNELL, Esq.
Nalle & Marnell PA
5551 Ridgewood DR
NAPLES, FL 33963

10. Name and Address of New Registered Agent

81 Name: MARY MARNELL, Esq
82 Street Address (P.O. Box Number is Not Acceptable): 5551 Ridgewood DR.
83: Suite 207
84 City: NAPLES, FL **FL** 85 Zip Code: 33961

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: Mary Marnell
(Signature, typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent signature required where mandated) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	PSTD	☐ Change ☐ Addition
NAME	BARNARD, THOMAS L	12 NAME	Thomas L. BARNARD	
STREET ADDRESS	25000 E TAMIAMI TRAIL	13 STREET ADDRESS	156 Evenwyster Cay	
CITY ST ZIP	NAPLES FL	14 CITY ST ZIP	NAPLES, FL 33961	
TITLE	D	21 TITLE	D	☐ Change ☐ Addition
NAME	RAY, BEVERLY	22 NAME	Robert S. HARCOY	
STREET ADDRESS	1221 W COAST HIGHWAY	23 STREET ADDRESS	156 Evenwyster Cay	
CITY ST ZIP	NEWPORT BEACH CA	24 CITY ST ZIP	NAPLES, FL 33961	
TITLE	D	31 TITLE	STD	☐ Change ☐ Addition
NAME	WOOTEN, DAVID C	32 NAME		
STREET ADDRESS	25000 E TAMIAMI TRAIL	33 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	34 CITY ST ZIP		
TITLE	VD	41 TITLE		☐ Change ☐ Addition
NAME	BASMAJIAN, ROBERT O	42 NAME		
STREET ADDRESS	25000 E TAMIAMI TRAIL	43 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	44 CITY ST ZIP		
TITLE	STD	51 TITLE		☐ Change ☐ Addition
NAME	HANE, FREDERICK K	52 NAME		
STREET ADDRESS	25000 E TAMIAMI TRAIL	53 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	54 CITY ST ZIP		
TITLE	V	61 TITLE		☐ Change ☐ Addition
NAME	MANNOFF, DONNA	62 NAME		
STREET ADDRESS	25000 TAMIAMI TRAIL	63 STREET ADDRESS		
CITY ST ZIP	NAPLES FL	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 this 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: Thomas L. Barnard
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

3 19 95 (Date)
813 389-1808 (Daytime Phone #)

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