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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H83519
1. Corporation Name
BONITA BEACH PLANTATION, INC.

(9)

FILED
May 16 1997 8:00am
Secretary of State

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			<del></del>		<del></del>					
Principal Plac		Mailing Address								
5164 BONITA B BONITA SPRING		5164 BONITA BEACH ROAD BONITA SPRINGS FL 34134-3813								
					3. Date incorporated or Qualified 10/31/1985		e of Last R	eport		
2. Principal P	lace of Business	2a. Mailing Address	···		4. FEI Number		Ar	oplied For		
21		26		59-2613093		No.	ot Applicable			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 A						
22		27		ree Required			equired			
City & Stat	· ·	City & State		6. Election Campaign Financing \$5.00 May Be						
23	Country	28	Country		Trust Fund Contribution			to Fees		
Zip	Country	Zip		ľ	8. This corporation has liability for in		ax under s No	. 199.032,		
24	25 25 Name and Address of Curren		101		Florida Statutes  10. Name and Address of New Reg					
LUC	KEY, R. FLOYD, JR.	A TIOSING OF THE STILL	81	Name						
	BONITA BEACH ROAD									
	ITA SPRINGS FL 33923		<b>82</b> Str		Address (P.O. Box Number is Not Acceptable)					
DON	IIA OFRINGO I E 30823		83							
							T			
			84	City		FL	<b>85</b> Zip	Code		
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the abov	ı e-named corj	poration submits this statement for the prition's board of directors. I hereby accep		hanging i	ls registered		
office or a agent. I a	registered agent, or both, in the State am f <mark>ami</mark> liar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flor	ithorized b ida Statule	y the corpora s.	tion's board of directors. I hereby accep	t the appo	intment as	registered		
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE:	Registered Ag	ent signalure requi	ired when reinstating)	DATE				
12.	OFFICERS ANI	· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12		
TITLE	I P	DELETE	15 TITLE	· ·			Change	Addition		
NAME	LUCKEY, R. FLOYD, JR.		1.2 NAME	1						
STREET ADDRESS	5164 BONITA BEACH RD.		1,3 STREE	ADDRESS						
CITY-ST-ZIP	MALIER ANNUAS PI		1.4 CITY-	ST-ZIP						
TITLE			2.11 TITLE				Change	Addilion		
NAME	LUCKEY, BARBARA		2½ NAME							
2230004 133000	L5164 BONITA BEACH RD		2 STREE	I ADDRESS						
CITY-ST-ZIP	BONITA SPRINGS FL		2, 4 C(TY-	ST-ZIP	<del>"</del>					
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition		
NAME			3½ NAME			•				
STREET ADDRESS			3,3 STREE	1 ADDRESS						
CITY-ST-ZIP			3,4. CITY	ST-ZIP						
TATLE		☐ DELETE	4,1 TITLE			_	Change	Addition		
NAME	1		4, 2 NAME							
STREET ADDRESS			4,3 STREE	T ADDRESS						
CITY-ST-ZIP			4,4 CHY-	ST-ZIP						
TITLE		☐ DELETE	5Å TITLE				Change	☐ Addition		
NAME			5,2 NAME							
STREET ADDRESS			5,3 STREE	T ADDRESS						
CITY-ST-ZIP			5 4 CITY-	ST-ZIP						
TITLE	1	☐ DELETE	61 THILE				Change	Addition		
NAME			6.2 NAME							
STREET ADDRESS			6,3 STREE	T ADDRESS						
CITY_ST_7IP	1		64 CITY-	ST - 71P						

14. I do hereby certify that the information cupplied 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 eath; 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 pour attachment with finaddress.

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4/28/02 941 - 947 - 4109