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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H99603

(3)

NORTH NAPLES UTILITIES, INC.

FILED
Apr 08 1997 8:00am
Secretary of State

Principal Plac 4500 EXECUTIV SUITE 300 NAPLES FL 339	E DRIVE	Mailing Address 4500 EXECUTIVE DRIVE SUITE 300 NAPLES FL 34119-8908	ISOO EXECUTIVE DRIVE SUITE 300 VAPLES FL 34119-8908						
US US					 Date Incorporated or Qualifie 02/17/1986 		ed 3a. Date of Last Report 03/19/1996		
····	hace of Business	2a. Mailing Address			4. FEI Number 59-2640398	······································		pplied For of Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc			5. Certificate of Status Desire			Additional	
22		27 City P. Cityle						equired	
City & Stati	l.:	City & State			Election Campaign Financi Trust Fund Contribution	ng 🔲		May Be to Fees	
Ζip	Country	Zφ	Countr	,	8. This corporation has liabilit			. 199.032,	
24	25] 9. Name and Address of Curr	29 rent Registered Agent	30]		Florida Statutes 10. Name and Address of Ne	Yes [
HOL	NSON, ROBERT W, JR		81	Name SAN		Trioglation of			
	EXECUTIVE DRIVE		82	Street Add	ET KELLY	entable)			
	E 300	,			ress (P.O. Box Number is Not Acc	1105			
NAP	LES FL 33999		83	SUU	E 300				
			84	City	PRES	FL	85 Zip	29de 9	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	es, the abov	e-named cor	poration submits this statement for	the nurnose o	changing i	ts registered	
office or r	registered agent, or both, in the Sta im familiar with and recent he ob	ate of Florida. Such change was a	authorized b	v the corpora	tion's board of directors. I hereby	accept the app	ointment as	registered	
SIGNATURE	JEY OLLY	" hnet k	elly			3/19/4	? >		
	Signature type dicer publiced name of agriculture of	agent and title it applicable. (NOTI AND DIRECTORS	E: Flegisley d Ag	ent signature requ	red when reinstating) ADDITIONS/CHANGES TO 0	DATE	DIDECTO	DC IN 42	
12. Tili f	OP OF WEEKS	DELETE	1.3 TITLE		< ▽ >	·····	Change	Addition	
NAME	HARDY, ROBERT S.		1.2 NAME		KELLY DANG		_ •		
STREET ADDRESS	4500 EXECUTIVE DRIVE	<	1.3 STREE	T ADDRESS	KELLY, JANES 4500 EXECUTI NAPLES FL HARDY, ROBBA	ve Dr	STE	300	
CITY-ST-7P	NAPLES FL		DHCTA.	ST-ZIP	NAPLES FL	3419	1		
HILE	OTS SHIELDS, JAMES E.	DELETE	2.1 TITLE	7	AND ANY AND WAS	STC.	Change	Addition	
NAME STREET ADDRESS	JEAN EVENIENE DINE		2.2 NAME	t address	AHICO / 100/000-	, =			
Caty-\$1-ZiP	NAPLES FL		2.4 CITY-	í					
Trite	DVP	DELETE	3.1 TITLE				Change	Addition	
NAME	HARDY, ROBERT PAUL		3.2 NAME	ļ					
STREET ADDRESS	4500 EXECUTIVE DRIVE NAPLES FL			T ADDRESS					
CHY-ST 762 THUE	ASS	DELETE	3.4. CHTY -	ST-ZIP	<u></u>		Change	Addition	
NAME	JOHNSON, ROBERT W, JR	A print	4. 2 NAME				- Sucurity	L. Addition	
STREET ADDRESS	4500 EXECUTIVE DRIVE			T ADDRESS					
COLVIST AND	NAPLES FL		4.4 CITY -	ST-ZIP					
11711		DELETE	5.1 TITLE				Change	Addition	
NAME CTUCK LAT DULCE			52 NAME						
STREET ADDRESS CRY+ST-ZIF			5.3 STREE	T ADDRESS					
THE		☐ DELETE	6.1 TITLE	5, 411			Change	Addition	
NAME			62 NAME		· i				
STREET ADDRESS			6.3 STREE	T ADDRESS	•				
CITY ST-7IP		3 - J 34 - 10 - 20	6.4 CITY-		d in Section 119.07(3)(i), Florida S				

14. To hereby certify that the information supplied with this fling 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 chapter, or on an attachment with an address.

SIGNATURE:

3/19/57 (941)597-906/