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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J11392 1. Corporation Name

GERMAIN OF NAPLES, INC.

Principal Place of Business Mailing Address											
13303 NORTH TAMIAMI TRAIL NAPLES FL 33963		13	% GERMAIN OF NAPLES. INC 13315 NORTH TAMIAMI TRAIL NAPLES FL 33963				DO NOT WRITE IN TH	S SPACE	Ē		
							3. Date Incorporated or Qualifed				
							04/25/1986				l
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	1			
21		26					59-2669450	Not Applicable			
Suite, Apt. #, etc.		نىتد ب	Suite, Apt.#, etc.				5 Certificate of Status Desired	Certificate of Status Desired			
		27					Fee Required				
City & State		Щ	City & State				6. Election Campaign Financing \$5.00 May Be				
23		28					Trust Fund Contribution	_	ded to	Fees	
Zip	Country	\perp	Zip		intry		8. This corporation owes the current year l		,		
24 25		29	<u></u>				Personal Property Tax.	Yes		□No	ł
	9. Name and Address of Curren	Regi	stered Agent		04	Nama	10. Name and Address of New Registere	ı Agent			ĺ
CED	MAIN DODEOT I ID				81	Name					
Germain, Robert L. Jr. 13315 North Tamiami Trail						Street Addre	ess (P.O. Box Number is Not Acceptable)				
					L	ļ					1
NAP	LES FL 33963				83						
	•				84	City		85	Zip C	ode	1
							pration submits this statement for the purpose				
office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	of Flor	ida. Such change was f, Section 607.0505, F	autnonze Torida Stat	d by lutes	the corporations.	n's board of directors, i nelecty accept the app	ointment	as reg	istered	
Signature, typed or printed name of registered agent a						nt signature required		ND DIDE	CTO	DC IN 12	É
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFFICERS A	Chi		Addition	7
TITLE	DPS		☐ DELETE	1.1 🕅		1			ı, igo		;
NAME	GERMAIN, ROBERT L. JR.			1.2 N							8
STREET ADDRESS	2107 21ST COURT					TADDRESS					5
CITY-ST-ZIP	NAPLES FL 33940	☐ DELETE			1.4 CITY-ST-ZIP			Chi	ange	Addition	{
TITLE	D D		☐ VELETE						J90		
NAME	GERMAIN, RICHARD B.			2.2 N							İ
- STREET ADDRESS	4740 RIVERSIDE DRIVE~ ~	- ,				TADDRESS					
CITY-ST-ZIP	COLUMBUS OH 43220				ST-ZIP		Ch	ange	Addition	1	
TITLE	D OFFINAIN OFFINEN		☐ DELETE	3.1 T			•			٠.٠٠٠٠٠٠	
NAME	GERMAIN, STEPHEN L.			3.2 N		T ADDDECC	•				
STREET ADORESS	166 STANBERRY AVENUE				3.3 STREET ADDRESS						
CITY-ST-ZIP	BEXLET UH 43209	EXLEY OH 43209			3.4. CITY-ST-ZIP			☐ Ch	ange	Addition	1
TITLE	,		☐ DELETE						5.1.95		
NAME				1	NAME	- 1					
STREET ADDRESS						T ADDRESS					
CITY-ST-ZIP					I.4 CITY-ST-ZIP			Ch	2008	Addition	1
TITLE			☐ DELÉTE	5.1 T 5.2 N			·	ااب	,90		
NAME						TADDRESS					
STREET ADDRESS	<u>-</u>										
CITY-ST-ZIP				5.4 C		ST-ZIP		□Ch	ance	Addition	1
TITLE TOTAL	1.8 d 316 2%		☐ DELETE						ange	- Addition	
	PACTURE OF THE LOW				AME	T + DDDDECC					
	1000 10mm 10 10 10 10 10 10 10 10 10 10 10 10 10					TADDRESS					
CITY-ST-ZIP	[, * * * * * * * * * * * * * * * * * * *			6.4 0	ITY-S	ST-ZIP					J

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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

FILED

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90075 006 ***150.00

A MARINER BLOS MERN MARK SINCE CONTRACTOR OFFICE REAL PROPERTY AND A SINCE REPORT FOR FACILITY