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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J25099

(9)

QUAIL WOODS ESTATES DEVELOPMENT CORP.

FILED Feb 04 1998 8:00am Secretary of State

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						:
Principal Place of Business Mailing Address						1917 91911 91911 91911 91917 1997
11983 TAMIAMI TRAIL NORTH SUITE #156 NAPLES FL 34110		SUITE #156	11983 TAMIAMI TRAIL NORTH SUITE #156 NAPLES FL 34110		DO NOT WRITE IN TH	IIS SPACE
MAPLES FL	54110	NAPLES PL 34110			3. Date Incorporated or Qualified	
! !					07/21/1986	
2. Principal	Place of Business	2a. Mailing Addres	SS		4. FEI Number	Applied For
21 26		26			59-2733926	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			• Certificate of Status Desired	Fee Required
City & State		City & State	<u>├</u> ¬ '		6. Election Campaign Financing	\$5.00 May Be
		28			Trust Fund Contribution	Added to Fees
Zip	Country			/	8. This corporation owes or has paid the current year Intangible	
24	25 29 29 9. Name and Address of Current Registered Agent		[30]	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
				Name	10. Name and Address of New Register	ou Agent
	JTTENPLAN, ELLIOT		<u> </u>	Ivanio		
11983 TAMIAMI TRAIL NORTH			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE #158 NAPLES FL 34110			83	 		
11/	VECO FE 34710					·
			84	City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.09	502 and 607.1508, Florida	Statutes, the abov	e-named co	rporation submits this statement for the purpose	of changing its registered
office or	registered agent, or both, in the Sta am familiar with, and accept the obli	ale of Florida. Such change ligations of, Section 607.05	e was authorized b 505. Florida Statute	y the corpora s.	ation's board of directors. I hereby accept the a	appointment as registered
SIGNATURE		3				
SIGNATURE	Signature, typed or printed name of registered a		(NOTE: Registered Ag	ont signature requ		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P DELETE					Change Addition
NAME GUTTENPLAN, ELLIOT			1.2 NAME			
STREET ADDRESS 11983 TAMIAMI TRAIL NORTH, #156			1.3 STREET	ADDRESS		
CITY-ST-ZIP	NAPLES FL 34110	Dete	1.4 CITY - ST - ZIP			
TALE	VP DELETE		TE 2.1 TITLE 2.2 NAME	ļ		Change Addition
	HAME GOLD, STEVEN			1		
STREET ADDRESS 11983 TAMIAMI TRAIL NORTH, #156			2.3 STREET			
CITY-ST-ZIP	NAPLES FL 34110		2.4 CiTY-	ST - ZiP		Change Addition
TITLE	L_1 DELETE		i			LI Change LI Aconton
NAME CZRECZ ADDROGE			3.2 NAME	LIDODECC		
STREET ADDRESS			3.3 STREET	1		
CITY-ST-ZIP TITLE	DELETE		3.4. CITY TE 4.1 TITLE	31-211		Change Addition
NAME	, buttle		4. 2 NAME			E charge Problem
STREET ADDRESS			4.2 NAME 4.3 STREET	AUDDECC		
	<u> </u>		4.4 CITY - S	1		i
CITY-ST-ZIP TITLE	DELETE DELETE			(-1.0*		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY- S			
TITLE		DELE		1 - 611		Change Addition

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.

NAME STREET ADDRESS CITY-ST-ZIP