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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

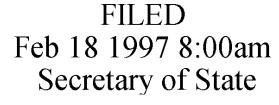
## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J67152

(5)

TARA-MANATEE, INC.



| Principal Place<br>2666 AIRPORT I<br>NAPLES FL 339 | ROAD SOUTH  | Mailing Address<br>2666 AIRPORT ROAD SOI<br>NAPLES FL 34112-4885 | <br>VTH           |       |                 |  |
|--|---|--|-------------------|-------|-----------------|--|
|  |   |  |                   |       |                 | 3. Date Incorporated or Qualified 38. Date of Last Report 04/14/1987 04/29/1996  |
|  | ace of Business   | 2a. Mailing Address  |                   |       |                 | 4. FEI Number Applied For<br>59-2793640 Not Applicable   |
| Suite, Apt.  | #. elc  | Suite, Apt. #, etc.  |                   |       |                 | S8 75 Additional   |
| 22   |   | 27   |                   |       |                 | 5. Certificate of Status Desired Fee Required  |
| City & State                                       | 9   | City & State   |                   |       |                 | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |
| <b>23</b> ; Zip                                    | Country   | <b>28</b>  | Cou               | ntry  | ·               | Trust Fund Contribution  |
| 24 34112   | 25  | 29   | 30                | ·     |                 | Florida Statutes Yes No  |
|  | 9, Name and Address of Current  | Registered Agent   |                   |       |                 | 10. Name and Address of New Registered Agent   |
|  | is, william t.  |  |                   | 81    | Name            |  |
|  | AIRPORT ROAD SOUTH  |  | ŀ                 | 82    | Street Ac       | ddress (P.O. Box Number is Not Acceptable)   |
| NAPI   | ES FL 33982   |  | ŀ                 | 83    |                 |  |
|  |   |  |                   |       |                 |  |
|  |   |  |                   | 84    | City            | FL   85   Zip Code 12  |
| l office or r                                      | to the provisions of Sections 607.0502<br>egistered agent, or both, in the State of<br>m familiar with, and accept the obliga | of Florida. Such change was                                      | s authorized      | yd t  | the corpo       | corporation submits this statement for the purpose of changing its registered<br>oration's board of directors. I hereby accept the appointment as registered |
| SIGNATURE  |   |  | DIE D             |       |                 | equired when reinstating) DATE   |
| 12.  | Signature, typen or printed name of registered agen<br>OFFICERS AND   |  | 13.               | Age   | nt signature re | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| TITLE  | DP  | ☐ DELETE   | 1.1 70            | LE    |                 | Change Addition  |
| NAME   | HIGGS, WILLIAM T.   |  | 1 2 NA            | ME    |                 |  |
| STREET ADDRESS                                     | 2666 AIRPORT RD SOUTH   |  | 1 3 ST            | REET  | ADDRESS         |  |
| CITY-S1-ZIP  | NAPLES FL   |  | 14 CI             |       | T - ZIP         |  |
| TITLE  | DVS   | ☐ DELETE   | 2 1 Tr            |       |                 | ☐ Change ☐ Addition i  |
| NAME   | HIGGS, ANTONIA M.   |  | 22 NA             |       |                 |  |
| STREET ADDRESS                                     | 2666 AIRPORT RD.<br>NAPLES FL   |  |                   |       | ADDRESS         |  |
| CITY-ST-ZIP  | VT  | DELETE   | 2. 4 C            |       | ST - ZIP        | <b>T</b> ☐ Change 🛣 Addition   |
| NAME   | SCHOENBERGER, ARTHUR  | <del></del>  | 3.2 NA            |       |                 | - ,  |
| STREET ADDRESS                                     | 2666 AIRPORT RD. SO.  |  | 3.3 ST            | REET  | ADDRESS         | Black, Brad J.<br>2666 Airport Road South  |
| CITY - ST - ZIP                                    | NAPLES FL   |  | 3.4 C             | ITY-S |                 | Naples, FL   |
| TITLE  |   | DELETE   | 4.1 1             | TLE   |                 | V ☐ Change 🔀 Addition  |
| NAME   |   |  | 4. 2 N            |       |                 | Loiacano, Matthew J.   |
| STREET ADDRESS                                     |   |  |                   |       | ADDRESS         | 2666 Airport Road South  |
| CITY-ST-ZIF  |   | T DOUGTE   | 4.4 CI            |       | T - ZIP         | Naples, FL Change Addition   |
| TITLE  |   | ☐ DELETE   | 5.1 TO            |       |                 | ☐ creange ☐ Adminor  |
| NAME   |   |  | 5.2 N/            |       | ADDRESS         |  |
| STREET ADDRESS                                     |   |  | 5.3 ST            |       |                 |  |
| C TY - ST - ZIP                                    |   | DELETE   | 6 1 TF            |       | 1 - 415         | ☐ Change ☐ Addition  |
| NAME   |   |  | 6.2 N/            |       |                 |  |
| STREET ADDRESS                                     |   |  |                   |       | ADDRESS         |  |
| CiTY-ST-ZIP  |   |  | 6.4 CI            |       |                 |  |
|  |   |  | - 11.E . II 15- + |       |                 | ated in Caption 110 07/2V/) Florido Statutos I further cortify that the  |

14. I do 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 charged, or on an attachment with an address.

2/12/107 011-775-2230