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

STREET ADDRESS

SIGNATURE:

CITY-ST-7(P

Mar 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # J67152 (5) TARA-MANATEE, INC. Principal Place of Business Mailing Address 2666 AIRPORT ROAD SOUTH 2666 AIRPORT ROAD SOUTH NAPLES FL 34112 NAPLES FL 33962-1885 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/14/1987 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2793640 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes ☐ No 25 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** HIGGS, WILLIAM T. 2686 AIRPORT ROAD SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34112 83 84 City 85 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed harne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 1006 Change TITLE HIGGS, WILLIAM T. NAME 1.2 NAME 2666 AIRPORT RD SOUTH STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE DVS 2.1 TITLE HIGGS, ANTONIA M. NAME 2.2 NAME 2666 AIRPORT RD. STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME BLACK, BRAD J 3.2 NAME 2666 AIRPORT RD. SO. STREET ADDRESS 3.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 3.4, CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE LOIACANO, MATTHEW J 4.2 NAME NAME 2666 AIRPORT ROAD SOUTH 4.3 STREET ADDRESS STREET ADDRESS NAPLES FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

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14. I horeby 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. William T Higgs 3/3/98

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP