

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 27 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J68106 (0)
1. Corporation Name
CANAL POINT MAINTENANCE CO.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
**EARLE ROSSITER-
10 HELEN LANE
FT. MYERS BEACH FL 33931-2940**

3. Date Incorporated or Qualified 3a. Date of Last Report
4. **04/17/1987** **05/01/1994**

2. Principal Place of Business 2a. Mailing Address
21 26

Applied For Not Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State City & State
23 28

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip Country Zip Country
24 25 29 30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**ROSSITER, EARLE
71 NANCY LANE
FORT MYERS BEACH FL 33931**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. 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, name or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	DPT
NAME	MORTON, ROBERT G.
STREET ADDRESS	34 HELEN LANE
CITY - ST - ZIP	FORT MYERS BEACH FL 33931-2940
TITLE	OV
NAME	MINER, NLS
STREET ADDRESS	17 NANCY LANE
CITY - ST - ZIP	FORT MYERS BEACH FL 33931-2942
TITLE	DS
NAME	CAPRON, BETTY J.
STREET ADDRESS	11 HELEN LANE
CITY - ST - ZIP	FORT MYERS BEACH FL 33931-2940
TITLE	D
NAME	BEASLEY, BOB
STREET ADDRESS	390 PALERMO CIR
CITY - ST - ZIP	FORT MYERS BEACH FL 33931
TITLE	D
NAME	OVERHULSER, JIM
STREET ADDRESS	25 NANCY LANE
CITY - ST - ZIP	FORT MYERS BEACH FL 33931-2942
TITLE	D
NAME	STEALY, AL
STREET ADDRESS	67 EMILY LANE
CITY - ST - ZIP	FORT MYERS BEACH FL 33931-2941

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY - ST - ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY - ST - ZIP	
13. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	D
15. STREET ADDRESS	RAYMOND HEINOLD
16. CITY - ST - ZIP	44 NANCY LANE FT. MYERS BEACH, FL 33931-3942
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY - ST - ZIP	

14. I do hereby certify that the information furnished on this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE *Robert G. Morton* *Robert G. Morton* **4-18-95 913 765 420**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature Phone #)