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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name **J88905** 

(1)

BARCLAY BUILDING CORPORATION

| 2375 TAMIAMI TR N. SUITE 300<br>NAPLES FL 33940 | 2375 TAMIAMI TR N. SUITE 300<br>NAPLES FL 33940 |  |
|---|---|--|
| Principal Place of Business                     | Mailing Address                                 |  |

| - I IBBAKO OFOL IBKUK IBKI | (811) BBIGT BIEL BIBIK BIBIT GLAIZ BJOTT GLAIT BIBIT LADI |
|----------------------------|---|

| Principal Place o        | of Puninger  | Maling Address                          |                    |                                       |  | Olit Biğik Biğit diğit   | ĐỊĐII ĐỊĐII ĐIỀII IĐĐI                  |
|--------------------------|--|---|--------------------|---------------------------------------|--|--------------------------|---|
| ,                        | TR N. SUITE 300                                      | 2375 TAMIAMI TR N. S                    | SHITE 300          |                                       |  |                          |   |
| NAPLES FL 33             |  | NAPLES FL 33940                         |                    |                                       |  |                          |   |
|                          |  |   |                    |                                       | 3. Date Incorporated or Qualified 08/24/1987   | 3a. Date of La<br>05/01/ |   |
| 2. Principal Plac        | ce of Business                                       | 2a. Mailing Address                     |                    |                                       | 4. FEI Number  |                          | Applied For                             |
| 21                       | 55 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.            | 26                                      |                    |                                       | 59-2845351   |                          | Not Applicable                          |
| Suite, Apt. #            | , etc  | Strite, Apt. #, etc                     |                    |                                       | 5. Certificate of Status Desired   |                          | .75 Additional                          |
| 22                       |  | 27                                      |                    |                                       |  |                          | ee Required                             |
| City & State             |  | Oty & State                             |                    |                                       | Election Campaign Financing     Trust Fund Contribution  |                          | 5.00 May Be<br>Added to Fees            |
| 23                       | Complex  | 28 Z <sub>1</sub> (1)                   | Count              | · · · · · · · · · · · · · · · · · · · | This corporation has liability for its second control of the | ****                     |   |
| Zip<br><b>24</b>         | Country 25   | 29                                      | 30                 | y                                     |  | □No                      |   |
| 24                       | g. Name and Address of Curren                        |   |                    |                                       | 10. Name and Address of New R  | egistered Agen           | t                                       |
|                          |  |   | 8                  | 1 Name                                |  |                          |   |
| BARON,                   | ELI  |   | 8                  | 2 Street Addr                         | ess (P.O. Box Number is Not Acceptal:  | e)                       |   |
| - •                      | MIAMI TRAIL N.                                       |   |                    | Ollegi Add                            |  |                          |   |
| SUITE 30                 | 00   |   | 8                  | 3                                     |  |                          |   |
| NAPLES                   | FL 33940   |   | l a                | 4 City                                |  | 85                       | Zip Code                                |
|                          |  |   |                    | 1 7                                   | ation submits this statement for the pur   | FL                       |   |
| CIONIATURE               | Signature typed or point discour of countries Lagrat | and the diapple as on the diapple as on | OTE Bajas ed A     | peraucu s roca<br>personal coreana    | atomission in the same received the appart of directors. Thereby accept the appart of directors and directors accept the appart of directors and directors accept the appart of directors.  | DATE                     |   |
| 12.                      | OFFICERS AN  | D DIRECTORS                             | 13.                | ;T                                    | AUDITIONS/CHANGES TO UFF   | Ch                       |   |
| THILE                    | BARON, ELI   | DELETE                                  | 1 1 THE<br>1 2 NAM | 1                                     |  |                          | 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| NAME                     | 2375 TAMIAMI TR N #300                               |   |                    | ET ADDRESS                            |  |                          |   |
| STREET ADDRESS           | NAPLES FL  |   |                    | -S'-7iP                               |  |                          |   |
| CITY - ST - ZIP<br>TITLE | P  |   | 2 1 111            |                                       |  | □ Ch                     | ange 🔲 Addition                         |
| NAME                     | MEADVIN, KENNETH R.                                  |   | 2.2 NAM            |                                       |  |                          | •                                       |
| STREET ADDRESS           | 2375 TAMIAMI TR N #300                               |   | 23SIH              | EET ADCRESS                           |  |                          |   |
| CITY-ST ZP               | NAPLES FL  |   |                    | r-St zin                              |  |                          |   |
| THLE                     |  | ☐ DELETE                                | 3 1 10             | .F                                    |  | ☐ Cr                     | ange 🔲 Addition                         |
| NAME                     |  |   | 3.2 NAF            | 4E                                    |  |                          |   |
| STREET ADDRESS           |  |   | 33 \$11            | REEF ADDRESS                          |  |                          |   |
| CITY-ST-ZIP              |  |   |                    | SI-ZIP                                |  |                          | Add tice                                |
| TITLE                    |  | ☐ DELETE                                | 4 1 111            |                                       |  | ☐ Cr                     | nange 🔲 Addition                        |
| NAME                     |  |   | 4.2 NA!            |                                       |  |                          |   |
| STREET ADDRESS           |  |   |                    | EET ADDRESS                           |  |                          |   |
| CITY - ST - ZIP          |  | F3 60.51                                |                    | * · S1 - Z1F                          |  | □ CI                     | nange Addition                          |
| TITLE                    |  | DELETE                                  | 5 1 TIT            |                                       |  |                          | lange La Authorit                       |
| NAME                     |  |   | 5.2 NA             |                                       |  |                          |   |
| STREET ADDRESS           |  |   |                    | REEL ADDRESS                          |  |                          |   |
| CITY - ST - ZIP          |  | DELETE                                  | 5.4 C:T            | Y - ST - 7:P                          |  |                          | nange Addition                          |
| TITLE                    |  | ☐ DECENE                                |                    |                                       |  | ب ا                      | - 5                                     |
| NAME                     |  |   | 62 NA              |                                       |  |                          |   |
| STREET ADDRESS           |  |   |                    | REET ADDRESS                          |  |                          |   |
| City-St-ZiP              |  |   | 6.4.01             | Y ST-ZIF                              |  |                          |   |

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that I are 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 early; that I am an officer or direction 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 Brock 13 principal, or on an attachment with an affires.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

941-262-6977

Dayton Plane #