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FILED  
May 19 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # J94331 (2)  
1. Corporation Name  
MONTEREY DEVELOPMENT MANAGEMENT COMPANY

Principal Place of Business  
5900 ENTERPRISE PARKWAY  
BILLY CREEK COMMERCE CENTER  
FT. MYERS FL 33905

Mailing Address  
5900 ENTERPRISE PARKWAY  
BILLY CREEK COMMERCE CENTER  
FT. MYERS FL 33905-5003

3. Date Incorporated or Qualified  
09/28/1987  
3a. Date of Last Report  
05/01/1996  
4. FEI Number  
65-0009155  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country  
30

9. Name and Address of Current Registered Agent

BUNDSCHU, CHRIS  
5900 ENTERPRISE PARKWAY  
FORT MYERS FL 33905

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNDSCHU, CHRIS	1.2 NAME	
STREET ADDRESS	5900 ENTERPRISE PKWY.	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	1.4 CITY-ST-ZIP	33905
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRAFT, DAN	2.2 NAME	
STREET ADDRESS	5900 ENTERPRISE PKWY.	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	2.4 CITY-ST-ZIP	33905
TITLE	V	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VETTRAINO, HENRY L	3.2 NAME	
STREET ADDRESS	5900 ENTERPRISE PKWY.	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	3.4 CITY-ST-ZIP	33905
TITLE	STD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNDSCHU, GAYLE	4.2 NAME	
STREET ADDRESS	5900 ENTERPRISE PKWY.	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL	4.4 CITY-ST-ZIP	33905
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 changed, or on an attachment with an address.

SIGNATURE: GAYLE BUNDSCHU 4/9/97 941-693-1000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #