

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

FILED
Jan 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K02840 (2)
1. Corporation Name
EMPIRE BUILDERS OF COLLIER COUNTY, INC.



Principal Place of Business C/O RICHARD B. MELSON 6000 TAYLOR RD #1 NAPLES FL 34109 US	Mailing Address C/O RICHARD B. MELSON 6000 TAYLOR RD #1 NAPLES FL 33942 34109
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 1750 J & C Blvd. #2 23 City & State Naples, FL 24 Zip 34109 25 Country	2a. Mailing Address 26 1750 J & C Blvd #2 27 Suite, Apt. #, etc. 28 City & State Naples, FL 29 Zip 34109 30 Country
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3. Date Incorporated or Qualified 11/17/1987	4. FEI Number 65-0019252	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent MELSON, RICHARD B. 6000 TAYLOR ROAD, UNIT 1 NAPLES FL 33942 34109
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 1750 J & C Blvd #2 83 84 City Naples FL 85 Zip Code 34109

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 Richard B. Melson, President 1-9-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS	
TITLE	DP MELSON, RICHARD B. 3409 BEDFORD CT NAPLES FL
TITLE	DST MELSON, AMY 3409 BEDFORD CT NAPLES FL
TITLE	VP GOMORY, KRISTOPHER 6000 TAYLOR ROAD #1 NAPLES FL 34109
TITLE	VP MUST, WILLIAM 600 TAYLOR RD #1 NAPLES FL 34109
TITLE	
TITLE	
TITLE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	1750 J & C Blvd #2
3.3 STREET ADDRESS	Naples FL 34109
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	1750 J & C Blvd. #2
4.3 STREET ADDRESS	Naples, FL 34109
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: Amy Nelson, Sec. - Treas. 1-9-98 941-566-3204

CR2E034 (10/97)