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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 # K09321

(6)

1. Corporation Name

865 OF LEE COUNTY, INC.

Principal Place of Business

3033 RIVIERA DR  
STE. 201  
NAPLES FL 33940-  
US

Mailing Address

3033 RIVIERA DR  
STE 201  
NAPLES FL 34103-2750  
US

3. Date Incorporated or Qualified  
12/29/1987

3a. Date of Last Report  
04/12/1996

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0016436

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State

City & State

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

Zip

34103

Country

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUDD, DAVID G.  
3033 RIVIERA DR  
STE 201  
NAPLES FL 33940-

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

34103

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
STO  
RUBIN, HARRY  
STREET ADDRESS  
3033 RIVIERA DR., STE. 201  
CITY-ST-ZIP  
NAPLES FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
PD  
RUBIN, ALEX  
STREET ADDRESS  
3033 RIVIERA DR., STE. 201  
CITY-ST-ZIP  
NAPLES FL

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
V  
RUBIN, BENJAMIN  
STREET ADDRESS  
3033 RIVIERA DR., STE 201  
CITY-ST-ZIP  
NAPLES FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
AS  
ZUCCARO, SHARON M.  
STREET ADDRESS  
3033 RIVIERA DR., STE. 201  
CITY-ST-ZIP  
NAPLES FL

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
VAS  
RUBIN, LINDA  
STREET ADDRESS  
3033 RIVIERA DR., STE. 201  
CITY-ST-ZIP  
NAPLES FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
V  
BUDD, DAVID G.  
STREET ADDRESS  
3033 RIVIERA DR., STE. 201  
CITY-ST-ZIP  
NAPLES FL

2.2 NAME ☐ Change ☐ Addition

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:

865 OF LEE COUNTY, INC.  
BY: [Signature]

3/26/97

(941) 263-7700

SIGNATURE AND TYPE OF REGISTERED AGENT, INCLUDING OFFICE OR RESIDENCE

Date Daytime Phone #

CR2E034 (9/96)