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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **K47508** **(2)**

1. Corporation Name
EXIT 17, CORPORATION

Principal Place of Business	Mailing Address
4500 EXECUTIVE DRIVE STE 300 NAPLES FL 33999 US	4500 EXECUTIVE DRIVE STE 300 NAPLES FL 34119-6908 US

3. Date Incorporated or Qualified: **11/21/1988**
3a. Date of Last Report: **01/23/1996**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24: 34119
Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

4. FEI Number: **65-0100853** ☐ 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

9. Name and Address of Current Registered Agent
JOHNSON, ROBERT W, JR
4500 EXECUTIVE DRIVE
SUITE 300
NAPLES FL 33999

10. Name and Address of New Registered Agent
81 Name: JANET KELLY
82 Street Address (P.O. Box Number is Not Acceptable): 4500 EXECUTIVE DRIVE
83 SUITE 300
84 City: NAPLES FL 85 Zip Code: 34119

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] 4/4/97 Sec/Treasurer
Signature, type or print name of registered agent, and title if applicable (Must be Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HARDY, ROBERT S 4500 EXECUTIVE DRIVE NAPLES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	ST JANET KELLY 4500 EXECUTIVE DR. NAPLES FL 34119	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HOWELL, SHANNON 4500 EXECUTIVE DRIVE NAPLES FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST JOHNSON, ROBERT W, JR 4500 EXECUTIVE DRIVE NAPLES FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BURGESON, RICHARD 4500 EXECUTIVE DR NAPLES FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	VP RICHARD BURGESON SP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/96)

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: [signature] 2/14/97 (941)599-9061