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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

K61597

(6)

PARKER-POINCIANA, INC.

FILED May 15 1998 8:00am Secretary of State



Delivation Divine of Desirons Address						410 11 810 11 818 11 610 11	[]]] []	
Principal Place of Business Mailing Address								
9400 GLADIOI	LUS DRIVE	9400 GLADIOLUS DRIVE						
Suite 250 Ft. Myers fl. 33908		Suite 250 Ft. Myers Fl. 33908				DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualified		
						01/27/1989		
2. Principal P	2a. Mailing Address	Address			4. FEI Number	Apj	plied For	
21		26				59-2927847	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	\$8.75 A	dditional
22 27						S. Certificate of Status Desired	Fee Rec	quired
City & State	e	City & State				6. Election Campaign Financing	\$5.00 (May Be
23	28					Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	\vdash	ıntry		8. This corporation owes or has paid the		_
24	25 29 30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curren	nt Hegistered Agent		B1	Name	10. Name and Address of New Registe	red Agent	
KUSSNER, STEPHEN L.				"	Name			
201		82 Street Add			ress (P.O. Box Number is Not Acceptable)			
SUITE 2100								
TAMPA FL 33802				83				
				84	City		85 Zip C	ode
				Ш			-L 3 2 0	
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 agen; and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AN	 	13.	o Agei	nt signature requir	ADDITIONS/CHANGES TO OFFICERS		S IN 12
TITLE	D	DELETE	1.1 7	TLE		7 DD THOMOSON IN TIGES TO GIT FIGETTO	Change	Addition
NAME	PARKER, JACK		1.2 NAME				_ 3	_
STREET ADDRESS 2800 S OCEAN BLVD			1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP					
TITLE	PĎ	☐ DELETE		2 1 TITLE			Change	Addition
NAME	TURKEN, WALTER D.		2.2 NAME					
STREET ADDRESS 9400 GLADIOLUS DRIVE, SUITI		TE 250	2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP FT. MYERS FL 33908			2. 4 CITY - ST - ZIP		T-ZIP			
TITLE	D	☐ DELETE	3.1 TITLE				Change	Addition
NAME	GLICK, ADAM		3.2 NAME		1			
STREET ADDRESS 104-70 QUEENS BLVD			3.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	FOREST HILLS NY		3.4. CITY - ST - ZIP		T-ZIP			1
TITLE			4 1 TI	4 1 TITLE			Change	Addition
NAME	KNIZNER, DAVID 4.2		4.2 N	AME				
STREET ADDRESS			4.3 ST	4.3 STREET ADDRESS				1
CITY-ST-ZIP			4 4 C	4.4 CITY-ST-ZIP				
TITLE	AS	DELETE	5 1 Ti	TLE			Change	Addition
NAME	MITCHELL, STEPHEN J.		5 2 NAME					
STREET ADDRESS			5381	5.3 STHEET ADDRESS				
CITY-ST-ZIP	TAMPA FL		5 4 CI	4 CITY - ST - ZIP				
TITLE	TS	☐ DELETE	6.1 Til	TLE	T		☐ Change	Addition
NAME	reisman, John		6.2 NA	AME				į
STREET ADDRESS	9400 GLADIOLUS DRIVE, SUI	TE 250	6.3 ST	REET	ADDRESS			f
CITY-ST-ZIP FT MYERS FL 33908				6.4 CITY - ST - ZIP				
14 bosoby c	artifu that the information cumplied up	th thin films door not qualify f	or the exc	mot	ion stated in	Section 110 07/3Vi) Florida Statutos I furthe	r portific that the i	oformation

• I hereby certify that the information supplied with his filling 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 supplieniental arrival 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 of trustee englowered 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 attainment with an address.

SIGNATURE:

AND THE SHAPE OF THE PROPERTY OF THE PROPERTY

3/26/90 Date:

911-181-1010 Daytime Phone # 0430887