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PROFIT CORPORATION ANNUAL REPORT



SIGNATURE: LILLS WALLS IN SIGNATURE AND TYPED OR PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE
Sandra B. Morthani
Socretary of State

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Yanoqual Place of Business Mailing Address						7 10970111 212 12112		• • . • . • . • . • . • . • . • . •		14841 01911 1081
300 GOODLETTE ROAD NORTH NAPLES FL 33940  NAPLES FL 33940  NAPLES FL 33940										
						3. Date Incorporated 06/02/1989	or Qualified		e of Last R 1/06/199	
Principa' Pla	Principa' Place of Business Suite, Apt. #., etc.		2a. Mailing Address 26 Suite, Apt. #, etc.			4. FEI Number 65-0124728	Applied For Not Applicable			
Suite, Apt #						5. Certificate of Status Desired		\$8.75 Additional		
Oity & State		[27]	City & State			6. Election Campaign	r Financing			Required  May Be
9	i I omini	28	****	7	<u>-</u>	Trust Fund Contrib	oution		Adde	d to Fees
2φ.	Country 25	29	Zφ	Countr 30	У	8. This corporation h Florida Statutes		intangible t □ No	ax under s	199.032,
	9. Name and Address	of Current Regis	tered Agent		7	10. Name and Addre	ss of New F	Registered	Agent	
WATSON	I. HELEN		8							
600 GOO	DLETTE ROAD NORTH	1				Idress (P.O. Box Number is	Not Acceptat	ole) 		
NAPLES I	FL 33940			83						
									85   Zij	o Code
<ul> <li>or registere</li> </ul>	o the provisions of Sections ad agent, or both, in the Sta h, and accept the obligation	ate of Florida. Such	n change was author	ized by the con	named corp	poration submits this statement pard of directors. I hereby ac	ent for the pu scept the app	rpose of ch cointment as	anging its r	egistered offic agent. I am
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