FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

L19965

(7)

DOCUMENT #
1. Corporation Name

DIGGER DEVELOPMENT CORPORATION							
Principal Place of Business 2680 SECOND AVENUE. SE NAPLES FL 33964		Mailing Address 2880 SECOND AVENUE, SE NAPLES FL 33964					
US		US			3. Date Incorporated or Qualified 10/02/1989	3a. Date of La 03/28/	
2. Principa' Place of Business		2a. Maining Address			4. FEI Number		Applied For
21		26	26		65-0141154	Not Applicable	
Suite Apt. #, etc		Suite, Apt. #, etc.	E		5. Certificate of Status Desired	1 1	.75 Additional ee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Count	у	8. This corporation has liability for	intangibie tax und	ler s 199.032,
24	25	29	30			□ No	
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New R	legistered Agen	t
			8	l Name			
	RD, JOHNNY M. ND AVE SE		62		dress (P.O. Box Number is Not Acceptab	ole)	
	FL 33964		8	3			
			8	4 City		FL 85	Zip Code
SIGNATURE.	Supur in trues or probational of registress up OFFICERS AN	ra dito ma _n is aco a Di DIRECTORS	z (It. Hogodosia) A,	ल्यां ५ पुरस्तानकः कर्म् ॥	ADDITIONS/CHANGES TO OFF		
TITLE	P	DELETE.	1 1711	E		☐ Ch	ange 🔲 Addition
NAME	HOWARD, JOHNNY		1.2 NAM	E .			
STREET ADDRESS	2880 2ND AVE SE		1.3 STHE	EL ADDRESS			
CITY-ST-ZIP	NAPLES FL		14 C-TY			[] Ch	ange Addition
TITLE	S COMADO COMADO ETTE	DELFTE	2 1 TITL			[_] C ₁₁	ange Addition
NAME	HOWARD, SCHARLETTE 2880 2ND AVE SE		2.2 NAM				
STREET ADDRESS	NAPLES FL		23 SIRI 24 CHY	ET AUDRESS			
CITY - ST - ZIP TITLE	THAT LEG YE	DELETE	3 1 111			☐ Ch	ange 🔲 Addition
NAME			3.2 NAM	ŧ			
STREET ADDRESS			3.3 \$18	EFT ADDRESS			
CITY-ST-ZIP			3.4.C-1Y	-S1-7-P			
TITLE		DELETE	4 1 TI`L	F		Cr	ange 🔲 Addition
NAME			4.2 NAM	E			
STREET ADDRESS			4.3 STE	ET ADDRESS			
CITY - ST - ZIP				- \$1 - ZIP		——————————————————————————————————————	
THLE		DEFE1E	5 1 1111	-		☐ Cr	lange
NAME			5.2 NAN				
STREET ADDRESS				ITT ADDRESS			
CHTY - ST - 7IF		for min the		·ST-7/P		□ Cr	nange [] Addition
TITLE		☐ DELETE	6 1 TIT				eriði. 🔲 Hannigil
NAME			6.2 NAN				
STREET ADDRESS	ļ			CELADORESS			
CITY OF 7ID	k		■ 64 CU1	-SI-216			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 it made under oath, that I am an officer or director of the corporation of 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:

5-15-96 94/353-2970