

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

**FILED**

**May 28 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **L21645 (1)**  
1. Corporation Name  
**R.A. VANWINKLE CONSTRUCTION COMPANY**



DO NOT WRITE IN THIS SPACE

Principal Place of Business: ~~880 10TH AVENUE S #104 NAPLES FL 34102 US~~ **421 BOW LINE DRIVE NAPLES FL 34103 US**  
Mailing Address: ~~880 10TH AVENUE S #104 NAPLES FL 34102 US~~ **421 BOW LINE DRIVE NAPLES FL 34103 US**

3. Date Incorporated or Qualified: **10/06/1989**  
4. FEI Number: **65-0153181**  
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 owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business: **421 BOW LINE DRIVE**  
2a. Mailing Address: **421 BOW LINE DRIVE**  
22. City & State: **NAPLES FL**  
23. Zip: **34103** Country: **US**  
27. City & State: **NAPLES FL**  
28. Zip: **34103** Country: **US**

9. Name and Address of Current Registered Agent:  
**VAN WINKLE, ROBERT A  
880 10TH AVENUE S.  
975 N. COLLIER BLVD  
MARCO ISLAND FL 34145**

10. Name and Address of New Registered Agent:  
81. Name:  
82. Street Address (P.O. Box Number is Not Acceptable): **421 BOW LINE DRIVE**  
84. City: **NAPLES** 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VAN WINKLE, ROBERT A</b>	1.2 NAME	
STREET ADDRESS	<b>880 10TH AVENUE S., #4</b>	1.3 STREET ADDRESS	<b>421 BOW LINE DRIVE</b>
CITY-ST-ZIP	<b>NAPLES FL 34102</b>	1.4 CITY-ST-ZIP	<b>NAPLES FL 34103</b>
TITLE	<b>VST</b>	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>VAN WINKLE, SALLY ANN</b>	2.2 NAME	
STREET ADDRESS	<b>880 10 AVENUE S., #4</b>	2.3 STREET ADDRESS	<b>421 BOW LINE DRIVE</b>
CITY-ST-ZIP	<b>NAPLES FL 34102</b>	2.4 CITY-ST-ZIP	<b>NAPLES FL 34103</b>
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Sally Ann Van Winkle* **SALLY ANN VAN WINKLE** **FLS-98 (04/14/93-08/14**

CR2E034 (10/97)