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

PROFIT CORPORATION ANNUAL REPORT



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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED	
Apr 16 1998 8:00am	Ĺ
Secretary of State	

	1998	DIVISION OF C	ORPORATIONS		
	MENT # L3465 Y DEVELOPMENT CORPOR	\ /			
GOIND	I DEVELOT MENT COM C	INTION			818 J. B. B. I. B.
Principal Place	e of Rusiness	Mailing Address		— † 1984) bil bar sakk bibil bikbi bilbi bilbi	Diddi dhoi: Didii didii didii didii didii
3800 NORTH AIRPORT ROAD 3785 N AIRPORT RD					
NAPLES FL 3	33942	NAPLES FL 34105		DO NOT WOITE	N TINO DOLOT
		U\$		DO NOT WRITE I	N THIS SPACE
				12/07/1989	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0160500	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25		30	Personal Property Tax due June 3	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Regi	istered Agent
	JINBY, CLYDE C.		81 Name		
	85 AIRPORT RD NORTH		82 Street Add	ress (P.O. Box Number is Not Acceptable	9)
NA	PLES FL 34105		83		
			84 City		FL 85 Zip Code
11, Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the pu	
office or re agent. I ar	egiste red agent, or both, in the State m fam iliar with, and accept the oblig	e of Florida. Such change was au ations of, Section 607.05 05, Flor	uthorized by the corpora rida Statutes.	poration submits this statement for the pution's board of directors. I hereby accept	the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered ag		Registered Agent signature requ		DATE
TITLE	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	QUINBY, CLYDE C.		1.2 NAME		
STREET ADDRESS	\$800 N. AIRPORT ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP		
TITLE	VS	DELETÉ	2.1 TITLE		Change Addition
NAME	QUINBY, PEARL		2,2 NAME		
STREET ADDRESS	3800 N. AIRPORT ROAD		2,3 STREET ADDRESS		•*
CITY-ST-ZIP	NAPLES FL	Document	2.4 CITY-ST-ZIP		Observe D Addition
TITLE		☐ DELE TE	3.1 TITLE		Change Addition
NAME DEPOSE ADODESO			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY+ST-ZIP		i .
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		<u> </u>
STREET ADDRESS			4,3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T DE EVA	5.4 CITY-ST-ZIP		
TITLE	•	DELETE	6.1 TITLE		☐ Change ☐ 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 atlachment with an address.