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

FILED
Mar 09 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 # L64210 (2)

1. Corporation Name
PRODUCT DEVELOPMENT OF NAPLES, INC.

Principal Place of Business	Mailing Address
2711 68TH ST SW NAPLES FL 33999	2711 68TH ST SW NAPLES FL 33999

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2711 68TH ST SW	2a. Mailing Address 26 2711 68TH ST SW
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 NAPLES FLORIDA	City & State 28 NAPLES FLORIDA
Zip / Country 24 34105 / 25	Zip / Country 29 34105 / 30

3. Date Incorporated or Qualified
04/11/1990

4. FEI Number
65-0177284
☐ Applied For
☐ Not Applicable

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

9. Name and Address of Current Registered Agent

FOSTER, ALAN, S., JR
2711 68TH ST SW
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name SAME

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code 34105

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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FOSTER, ALAN S JR		1.2 NAME	
STREET ADDRESS	2711 68TH ST. SW		1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP	34105
TITLE	SD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FOSTER, ELIZABETH D.		2.2 NAME	
STREET ADDRESS	2711 68TH STREET SW		2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33999		2.4 CITY-ST-ZIP	34105
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			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	

CR2E034 (10/97)

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 _____ 04/11/1998