FILE NOW: FILING FI		1 1 1 1		b.00 FILED			
PROFIT		LORIDA DEPART	-	STATE	Feb 16 1998 8	:00am	
CORPORATION 🔏		Sandra B.					
ANNUAL REPORT		Secretary Division of Co		ONS	Secretary of	State	
1998	<u> </u>						
DOCUMENT # L754	436	(0)					
BACK NINE OF NAPLES, INC.	•	•					
						ANDI BARIL BLELL JARI	
Principal Place of Business Mailing Address					T (GRIJAN) BIN (DRBY EXILL BING BING BING BING BING) BINGS BING	D(E)) TIES BLAIS (DA)	
C/O MARY D. O'BRIEN C/O MARY D. O'BRIEN 140 SOUTH GOLF DRIVE NAPLES FL 33940-5349 C/O MARY D. O'BRIEN 140 SOUTH GOLF DRIVE NAPLES FL 33940-5349					DO NOT WRITE IN THIS SPA	CE	
			- 1		3. Date Incorporated or Qualified 05/23/1990	Ì	
2. Principal Place of Business	ի	ig Address			4. FEI Number	Applied For	
Suite, Apt. #, etc.	26 Suite	, Apt. #, etc.			NOT APPLICABLE S	Not Applicable 8.75 Additional	
22	27				5. Certificate of Status Desired	Fee Required	
City & State	28 City 8	\$ State				\$5.00 May Be Added to Fees	
Zip Country	Zip		Country		8. This corporation owes or has paid the current		
24 25 9. Name and Address of ([29] Current Registered		30]		Personal Property Tax due June 30. Ye 10. Name and Address of New Registered Age		
NOVICK, ALAN, S, ESQ			81	Name			
800 LAUREL OAK DR., SUITE 200 NAPLES FL 33963			82	82 Street Address (P.O. Box Number is Not Acceptable)			
TOPPELO PE 30300			63				
			84	City	E1 8:	5 Zip Code	
11. Pursuant to the provisions of Sections 6	07.0502 and 607.150	08, Florida Statutes	s, the above	-named	corporation submits this statement for the purpose of cha	inging its registered	
agent. Fam familiar with, and accept the	e State of Florida, Suc o obligations of, Secti	on change was au ion 607.0505, Flori	ida Statutes	the corp s.	corporation submits this statement for the purpose of chapporation's board of directors. I hereby accept the appointment	nent as registered	
SIGNATURE Signature, typied or peopled came of regist	recording out and interfappier	nble (NOTE	Registered Age	ni signature	required when reinstating) DATE		
TILE PTD OFFICE	RS AND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIF	RECTORS IN 12 Change Addition	
NAME O'BRIEN, DANIEL P.			1.2 NAME				
STREET ADDRESS 140 SOUTH GOLF DRIV	E		1.3 STREET				
CITY-SI-ZIP NAPLES FL HILE SVD		DELETE	1.4 CITY - S 2.1 TITLE	T-ZIP		Change Addition	
NAME O'BRIEN, MARY D.			2.2 NAME				
STREET ADDRESS 140 SOUTH GOLF DRIV NAPLES FL	Œ		2.3 STREET 2.4 CITY-5				
TITLE VD	··· • · · · · · · · · · · · · · · · ·	DELETE	3.1 TITLE	or-zir		Change	
NAME O'BRIEN, PETER J. SR.	CT.		3.2 NAME	1000500	O'BRIEN, PETER J.		
STREET ADDRESS 1528 NORTH WIELAND CHICAGO IL	5 1.		3 3 STREET 3 4. CITY - S		1541 N. WELLS CHICAGO, IL 60610		
TITLE VD		DELETE	4.1 TITLE		Ϋ́,	Change	
NAME STUMPF, KATHLEEN STREET ADDRESS 1520 NORTH WELLS			4. 2 NAME 4.3 STREET		STUEPF, KATHLEEN 1541 H. WELLS		
CITY-ST-ZIP CHICAGO IL			4.4 CITY-S		CHICAGO, IL. 60610		
TITLE		DELETE	5 1 TITLE			Change Addition	
NAME STREET ADDRESS			5 2 NAME 5 3 STREET	address			
CITY-ST-ZIP		Therese	5.4 CITY - S	T-ZIP		Change I delibit	
TITLE		L_ DELETE	6.1 TITLE 6.2 NAME			Change	
STREET ADDRESS			6.3 STREET	ADDRESS		}	
CITY-ST-ZIP			6.4 (ITY-S	t-Z1P			
14. I hereby certify that the information suppl	blied with this filma de	oes not qualify for	the example	ion state	od in Section 119.07(3)(i), Florida Statutes. I further certify nature shall have the same legal effect as if made under of required by Chapter 607, Florida Statutes; and that my na	that the information	

SIGNATURE: