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

PROFIT CORPORATION ANNUAL REPORT

1997

City & State

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L81857

(9)

City & State

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ORO-GOLD OF COLLIER CO	UNTY, INC.					
Principal Place of Business	Mailing Address	T (EE) (ADI) EEK IEIGE 1480 I TELEK DANN JOHN BIRDI RIBIK DIDIN HERI DIRIK DIDIN HERI				
ROUTE 1. BOX 1042 LABELLE FL 33935	ROUTE 1. BOX 1042 LABELLE FL 33935					
		3. Date Incorporated or Qualified 06/18/1990	3a. Date of Last Report 04/18/1996			
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For			
21	26	65-0208387	Not Applica			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional			

25 29 24 9. Name and Address of Current Registered Agent HIATT, GEORGE E. **ROUTE 1, BOX 1042** LABELLE FL 33935

Country

			Э.	Certificate of Status Desired	ш	F	ee Required	
			6.	Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees	
ount	try		В.	This corporation has liability for Florida Statutes		ax ur] No	nder s. 199.032,	
丁			10.	Name and Address of New Re	egistered A	gent		
8	11	Name						
8	2	2 Street Address (P.O. Box Number is Not Acceptable)						
8	33							
8	14	City			FL	85	Zip Code	
	_					_		

FILED

Feb 18 1997 8:00am

Secretary of State

Applied For Not Applicable

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.

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SIGNATURE		21021 5		PAIC		
	Signature, typed or profed name of registeric agent and title if applicable	e (NOTER	agistered Ageat signature re	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	NO DIOCOTOD	CINI 10
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	1	DELETE	1.1 TITLE		Change	Addition
NAME	HIATT, RAMONA I.		1.2 NAME			
STREET ADDRESS	RT 1 BOX 1042		1.3 STREET ADDRESS			
CITY-ST-ZIP	LABELLE FL		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		Change	Addition
NAME	HIATT, GEORGE E.		2.2 NAME			
STREET ADDRESS	ROUTE 1, BOX 1042		2.3 STREET ADDRESS			
CITY-S1-ZIP	LABELLE FL		2. 4 CITY - ST- ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS		12	3.3 STREET ADDRESS]
C TY-ST-ZIP			3 4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
C TY-ST-ZIP			4.4 CITY-ST-Z:P			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-7/P			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			G.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
	I .		■			

6.4 CITY-ST-7IP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. If 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.

(941) 175-2121