

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L96933** (1)

1. Corporation Name  
**VANDERBILT REALTY GROUP, INC.**



Principal Place of Business: **2223 TRADE CENTER WAY NAPLES FL 33942 US**  
Mailing Address: **2223 TRADE CENTER WAY NAPLES FL 33942 US**

3. Date Incorporated or Qualified: **08/30/1990**  
3a. Date of Last Report: **02/07/1995**

21. Principal Place of Business: **1300 Grand Isle Ct.**  
22. Suite, Apt. #, etc.  
23. City & State: **NAPLES FL**  
24. Zip: **33963** 25. Country: **USA**  
26. Mailing Address: **1300 Grand Isle Ct.**  
27. Suite, Apt. #, etc.  
28. City & State: **NAPLES FL**  
29. Zip: **33963** 30. Country: **USA**

4. FEI Number: **65-0224806**  
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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**PRIMEAU, RICHARD G  
2223 TRADE CENTER WAY  
NAPLES FL 33942**

81. Name: **Richard G. Primeau**  
82. Street Address (P.O. Box Number is Not Acceptable): **1300 Grand Isle Ct.**  
83.  
84. City: **NAPLES** 85. Zip Code: **FL 33963**

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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: *Richard G. Primeau* (NOTE: Registered Agent signature required when reinstating.) DATE: **4-18-96**

**12. OFFICERS AND DIRECTORS**

TITLE	<b>PSD</b>	<input type="checkbox"/> DELETE
NAME	<b>PRIMEAU, RICHARD G.</b>	
STREET ADDRESS	<b>4421 RIVERMATCH DRIVE #202</b>	
CITY-ST-ZIP	<b>BONITA SPRINGS FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>PRIMEAU, RICHARD G.</b>	
STREET ADDRESS	<b>4421 RIVERMATCH DRIVE #202</b>	
CITY-ST-ZIP	<b>BONITA SPRINGS FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>STURDYVIN, DAVID M.</b>	
STREET ADDRESS	<b>7242 MILL POND CIRCLE</b>	
CITY-ST-ZIP	<b>NAPLES FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>DALY, MICHAEL R.</b>	
STREET ADDRESS	<b>5800 GLEN COVE DRIVE #202</b>	
CITY-ST-ZIP	<b>NAPLES FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Richard G. Primeau Pres.* 4-18-96 741-566-2000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: Daytime Phone #

CR2E034 (12/95)