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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M94864

(9)

1. Corporation Name
ANDAUL, INC.



Principal Place of Business

22 BRAMBLEWOOD PT
NAPLES FL 33999

Mailing Address

22 BRAMBLEWOOD PT
NAPLES FL 34105-7111

3. Date Incorporated or Qualified
08/18/1988

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

21 2640 GOLDEN GATE PARKWAY

Suite, Apt. #, etc.

22 SUITE 303

City & State

23 NAPLES FL

Zip

24 34105

Country

25 USA

2a. Mailing Address

26 2640 GOLDEN GATE PARKWAY

Suite, Apt. #, etc.

27 SUITE 303

City & State

28 NAPLES FL

Zip

29 34105

Country

30 USA

4. FEI Number

65-0072181

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

ROBERTS, PETER J
22 BRAMBLEWOOD POINT
NAPLES FL 33999

10. Name and Address of New Registered Agent

81 Name

ROBERTS, PETER J

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

2640 GOLDEN GATE PARKWAY

83

SUITE 303

84 City

NAPLES

FL

85 Zip Code

34105

11. Pursuant to the provisions of Sections 607.0102 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 607.005, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

PETER J ROBERTS (PRES)

4/15/97

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME ROBERTS, PETER J.
STREET ADDRESS 22 BRAMBLEWOOD POINT
CITY-ST-ZIP NAPLES FL

TITLE S ☐ DELETE
NAME ROBERTS, LINDA H.
STREET ADDRESS 22 BRAMBLEWOOD POINT
CITY-ST-ZIP NAPLES FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☐ Addition
1.2 NAME ROBERTS, PETER J
1.3 STREET ADDRESS 2640 GOLDEN GATE PARKWAY SUITE 303
1.4 CITY-ST-ZIP NAPLES FL 34105

2.1 TITLE SECRETARY ☐ Change ☐ Addition
2.2 NAME ROBERTS, LINDA H.
2.3 STREET ADDRESS 2640 GOLDEN GATE PARKWAY SUITE 303
2.4 CITY-ST-ZIP NAPLES FL 34105

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER J ROBERTS (PRES)

4/15/97

Date

(41) 648 8444

CR2E034 (9/96)