Principal Place of Business       2a. Mailing Address       4         26       26       5         Suite. Apt. #, etc.       5         27       27         City & State       6         28       28         Zip       Country         25       29         9. Name and Address of Current Registered Agent       10         81       Name	Mar 11 1997 8:00an Secretary of State         Image: secretary of Sta
ANNUAL REPORT 1997 Secretary of State DIVISION OF CORPORATIONS CORPORATIONS CORPORATION Name CORPORATION DOCUMENT # N18942 (5) LEE COUNTY FISHING REEF ASSOCIATION, INC. LEE COUNTY FISHING REEF ASSOCIATION, INC. Tincipal Place of Business D. BOX 1022 COA GRANDE FL 33921 Principal Place of Business 2a. Mailing Address 2b. BOXA GRANDE FL 33921-1022 3 Principal Place of Business 2a. Mailing Address 2b. BoxA GRANDE FL 33921 City & State 2chy &	Secretary of State         Image: Secretary of State
1997       Division of corporations         DOCUMENT # N18942 (5)       Corporation Name         LEE COUNTY FISHING REEF ASSOCIATION, INC.         rincipal Place of Business       Mailing Address         0. BOX 1022       P.O. BOX 1022         CA GRANDE FL 33921       BOCA GRANDE FL 33921-1022         3       Principal Place of Business         2. Principal Place of Business       2a. Mailing Address         4       2b         Suite. Apt #, etc       Suite, Apt. #, etc.         27       City & State         28       2a         29       20         8. Name and Address of Current Registered Agent       10         11       Name         120       Country         28       2a         29       20         8. Name and Address of Current Registered Agent       10         11       Name         62       Street Address (         83       3         84       City         94       City         95       Such change was subhorized by the corporation's agent. I am familiar with, end accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation's agent. I am familiar with, end accept the obligations of, Section 617.0503, Florida Statutes, mailed eth	Date Incorporated or Qualified 01/27/1987     Sa. Date of Last Report 03/04/1996     FEI Number 65-0010111     Not Applicable Certificate of Status Desired \$8.75 Additional Fee Required     Status Desired \$5.00 May Be Atded to Fees     This corporation has liability for intangible tax under s. 199.032, Florida Statutes \$9.00     Name and Address of New Registered Agent     FL     Box Number is Not Acceptable     Sa. Date of Last Report O3/04/1996     Sa. Date of Last R
LEE COUNTY FISHING REEF ASSOCIATION, INC.  Tincipal Place of Business O. BOX 1022 COA GRANDE FL 33821 BOCA GRANDE FL 33821 COA	Date Incorporated or Qualified 01/27/1987       3a. Date of Last Report 03/04/1996         Image: Status Part of Status Desired       Applied For 85-0010111         Image: Status Desired       \$8.75 Additional Fee Required         Image: Status Desired       \$4dded to Fees         Image: Trust Fund Contribution       Added to Fees         Image: Trust Fund Contribution       Yes         Image: Trust Fund Contribution
Trincipal Place of Business Mailing Address O. BOX 1022 OCA GRANDE FL 33921 BOCA GRANDE FL 33921 CA GRANDE FL 33921 BOCA GRANDE FL 33921-1022 CA GRANDE FL 33921 CA G	Date Incorporated or Qualified 01/27/1987       3a. Date of Last Report 03/04/1996         Image: Status Part of Status Desired       Applied For 85-0010111         Image: Status Desired       \$8.75 Additional Fee Required         Image: Status Desired       \$4dded to Fees         Image: Trust Fund Contribution       Added to Fees         Image: Trust Fund Contribution       Yes         Image: Trust Fund Contribution
O. BOX 1022 OCA GRANDE FL 33921       P.O. BOX 1022 BOCA GRANDE FL 33921-1022         3         . Principal Place of Business       2a. Mailing Address         26       26         Suite. Apt. #, etc.       5         City & State       27         City & State       28         Zip       Country         25       29         30       9         9       25         29       30         9       25         29       30         9       25         20       30         9       81         Name and Address of Current Registered Agent         10       81         11       10         12       10         13       10         14       10         15       10         15       10         15       10         15       10         15       10         16       10         17       10         18       Name         19       10         10       10         10       10	Date Incorporated or Qualified 01/27/1987       3a. Date of Last Report 03/04/1996         Image: Status Part of Status Desired       Applied For 85-0010111         Image: Status Desired       \$8.75 Additional Fee Required         Image: Status Desired       \$4dded to Fees         Image: Trust Fund Contribution       Added to Fees         Image: Trust Fund Contribution       Yes         Image: Trust Fund Contribution
OCA GRANDE FL 33921     BOCA GRANDE FL 33921-1022       3       Principal Place of Business     2a. Mailing Address       Suite. Apt. #, etc.     2b       Suite. Apt. #, etc.     5       City & State     27       City & State     28       Zip     Country       25     29       30     9. Name and Address of Current Registered Agent       10       81     Name       ITALIANO, NELSON       150 PALM AVENUE       BOCA GRANDE FL 33921       81       Name       10       81       Name       125       29       30       9. Name and Address of Current Registered Agent       10       81       Name       ITALIANO, NELSON       150 PALM AVENUE       BOCA GRANDE FL 33921       83       84       25       26       27       28       29       30       9       10       81       12       130       14       14       15       15       16       17       18 <tr< td=""><td>01/27/1987       03/04/1996         FEI Number       Applied For         65-0010111       Not Applicable         6. Certificate of Status Desired       \$8.75 Additional Fee Required         6. Certificate of Status Desired       \$8.75 Additional Fee Required         7. 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         9. Name and Address of New Registered Agent         (P.O. Box Number is Not Acceptable)         FL         85       Zip Code</td></tr<>	01/27/1987       03/04/1996         FEI Number       Applied For         65-0010111       Not Applicable         6. Certificate of Status Desired       \$8.75 Additional Fee Required         6. Certificate of Status Desired       \$8.75 Additional Fee Required         7. 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         9. Name and Address of New Registered Agent         (P.O. Box Number is Not Acceptable)         FL         85       Zip Code
Principal Place of Business       2a. Mailing Address       4         26       26       5         Suite. Apt. #, etc.       5       27         City & State       27       6         Zip       Country       28         Zip       Country       29       30         9       25       29       30         9       25       29       30         9       25       29       30         9       25       29       30         9       8       25       29         9       25       29       30         9       8       10         9       8       10         9       8       10         9       8       10         9       8       10         9       8       10         10       10       10         11       Name       10         12       130       10         130       14       10         14       Name       10         150       PALM AVENUE       10         16       Pursuant to the provisions of Sections 617.05	01/27/1987       03/04/1996         FEI Number       Applied For         65-0010111       Not Applicable         6. Certificate of Status Desired       \$8.75 Additional Fee Required         6. Certificate of Status Desired       \$8.75 Additional Fee Required         7. 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         9. Name and Address of New Registered Agent         (P.O. Box Number is Not Acceptable)         FL         85       Zip Code
26         Suite. Apt. #, etc.         Suite. Apt. #, etc.         27         City & State         28         Zip         Country         25         29         30         9. Name and Address of Current Registered Agent         81         Name         ITALIANO, NELSON         150 PALM AVENUE         BOCA GRANDE FL 33921         83         84         City         1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE         Signature: typed or printed name of registered agent and into if applicable         (NOTE Registered Agent signature required whom a signature r	65-00 10 111     Not Applicable     Not Applicable     Not Applicable     Second and the se
27       City & State       6         City & State       28       28         Zip       Country       Zip       Country       8         25       29       30       9         9. Name and Address of Current Registered Agent       10         9. Name and Address of Current Registered Agent       81         10       81       Name         ITALIANO, NELSON       82       Street Address (         150 PALM AVENUE       82       Street Address (         BOCA GRANDE FL 33921       83       83         It office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE       Signature: typed or printed name of registered agent and into if applicable       (NOTE Registered Agent signature required whom the state of statutes).	Fee Required         Fee Required         Fee Required         Feet Required         Fraction Campaign Financing         Trust Fund Contribution         Added to Fees         Florida Statutes         Yes         No         Name and Address of New Registered Agent         (P.O. Box Number is Not Acceptable)         FL         85         Zip Code
Zip       Country       Zip       Country       8         25       29       30       30       9         9. Name and Address of Current Registered Agent       10         9. Name and Address of Current Registered Agent       10         81       Name         ITALIANO, NELSON       81         150 PALM AVENUE       82         BOCA GRANDE FL 33921       83         84       City         1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE       Signature: typed or printed name of registered agent and into if applicable	Trust Fund Contribution Added to Fees  This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No Name and Address of New Registered Agent  P.O. Box Number is Not Acceptable)  FL 85 Zip Code
25       29       30         8. Name and Address of Current Registered Agent       10         9. Name and Address of Current Registered Agent       10         ITALIANO, NELSON         150 PALM AVENUE       82         BOCA GRANDE FL 33921       83         84         Office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. Lam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE         Signature, typed or printed name of registered agent and into if applicable	Florida Statutes Yes No Name and Address of New Registered Agent (P.O. Box Number is Not Acceptable)  FL 85 Zip Code
ITALIANO, NELSON       81       Name         ISO PALM AVENUE       82       Street Address (         BOCA GRANDE FL 33921       83       84         City       84       City         1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation of flore or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. Lam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE       Signature, typed or printed name of registered agent and into if applicable	(P.O. Box Number is Not Acceptable)
ITALIANO, NELSON 150 PALM AVENUE BOCA GRANDE FL 33921 1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. Lam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and into if applicable (NOTE: Registered Agent signature required who	FL 85 Zip Code
150 PALM AVENUE BOCA GRANDE FL 33921       83         84       City         1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.         SIGNATURE       Signature, typed or printed name of registered agent and into if applicable	FL 85 Zip Code
Bell     Bell     Bell     Bell     City     Bell     City     City     City     City     Sections of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporate     office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's     agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.     IGNATURE     Signature, typed or printed name of registered agent and life if applicable     (NOTE Registered Agent signature regulied when the section of the sectin of the section of the sectin of the section of the secti	
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agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and litle if applicable (NOTE: Registered Agent signature required who	
2. OFFICERS AND DIRECTORS 13.	
	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
AME SHERMAN, DAVID 12 NAME	
IREET ADDRESS POBOX 1022 N/A 1.3 STREET ADDRESS	
ITY-ST-ZIP BOCA GRANDE FL 14 CITY-ST-ZIP	Chance Addition
TLE D 2.1 TITLE 2.2 NAME 2.2 NAME 2.2 NAME	
REET ADDRESS POBOX 1022 N/A 2.3 STREET ADDRESS	
TY-ST-ZIP BOCA GRANDE FL 2.4 CTY-ST-ZIP	
TLE D DELETE 3.1 TITLE	Change L Addition
AME RODRIGUEZ, RAYMOND 32 NAME	
TREET ADDRESS P O BOX 1022 N/A 3.3 STREET ADDRESS	
	Change 🔲 Addition
AME ITALIANO, NELSON 4.2 NAME	
TREET ADDRESS 1 PALM AVENUE 4.3 STREET ADDRESS	
TLE DELETE 5.1 TITLE	Change Addition
TLE D S.I TITLE S.I TITLE S.M. S.2 NAME S.2 NAME	unange La Adolison
THEET ADDRESS 180 DAMIFIWILL ST 5.3 STREET ADDRESS	
ITY-ST-ZIP BOCA GRANDE FL 5.4 CITY-ST-ZIP	
ITLE DELETE 6.1 TITLE	Change 🛄 Addition
IAME 6.2 NAME	
TREET ADDRESS 6.3 STREET ADDRESS	
64 CITY-ST-ZIP     64 CITY-ST-ZIP      4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in S	Section 119.07(3)(i), Florida Statutes, I further certify that the
The received working that the internation supplied that this minu woos not tudally for the exprimition stated in c	
4. To hereby clearing that the information supplied with this iming observed to duality for the exclusion information indicated on this annual report or supplemental annual report is true and accurate and that my t i am an officer or director of the corporation or the receiver or trustee empowered to execute this report as appears in Block 12 or Block 1317 changed, or on empattachment with an address.	signature shall have the same legal effect as if made under oath; that