## FILE NOW: FILING FEE IS \$61.25

NONPROFIT
ORPORATION
NUAL REPORT
1997

IMENT # N95000002961

This is a series of Business

We have a series of Business

Mailing Address

Mailing Address

## FILED Mar 24 1997 8:00am Secretary of State

p i moc	5 Of \$1030 1633	IVI	aling Appress								
								3. Date Incorporated or Qualified June 19, 1995 N/A		Report	
Place of Business 28. Mailing Address								4. FEI Number		Applied For	
21, 260 Bayline Dr. 26 P.O. Box 3455					55	6!		65-0592148	$\vdash$	Not Applicable	
Suite, Apt. #, etc.   Suite, Apt. #, etc.   22   Fourth Floor   27							5. Certificate of Status Desired See Required Fee Required				
City & State City & State  23 N. Ft. Myers, Florida  28 N. Ft. Myers, Fl								6. Election Campaign Financing \$5.00 May Be			
7p	The second secon						l <u>a</u>				
24 33917	25 Lee	29		465	Count	-		8. This corporation has liability for intangible tax		s. 199.032,	
24, 53317	9. Name and Address of Current	Regis	33918-3	455	30  <u>L</u> e	ee_		Florida Statutes Yes Y 10. Name and Address of New Registered Age			
					8	1 Na	ame	10. Harris and Address of New Registered Age	mi		
Wayno E Daltwy											
						82 Street Address (P.O. Box Number is Not Acceptable)					
4980 Bayline Drive, Fourth Floor N. Ft. Myers, FL 33917						83					
N. Ft.	myers, FL 3391/				<u></u>	1					
					8	4 Ci	ty	FI	<b>15</b> Zip	Code	
11. Pursuant to	the provisions of Sections 617.0502 a	and 61	17.1508, Florid	a Statute	s, the abo	ve-nai	med corr	poration submits this statement for the purpose of ch	anging	ite registered	
agent Lan	igistered agent, or both, in the State of infamiliar with, and accept the obligation	l Florid ons of	ta. Such chang , Section 617.0	je was a i503, Flo	uthorized t rida Statuti	by the	corpora	poration submits this statement for the purpose of chition's board of directors. I hereby accept the appoint	ment a	s registered	
SIGNATURE											
12.	Signature: type stor present name of registered agent.			(NOTE		gent eig	nature requi	ired when reinstating) DATE			
TILLE	OFFICERS AND I	UIREU	DEL DEL	CTC .	13.			ADDITIONS/CHANGES TO OFFICERS AND DI			
NAME				.c.ic	1.1 TITLE			The state of the s	Change	-71	
					1.2 NAME		D  -T	homas Kelly, SouthTrust Bank	k of	SW FL	
STHEET ADDRESS					1.3 STRE	T ADOR	ESS   1	530 Heitman Street			
CHY ST ZIP						ST-ZIP		Thomas Kelly, SouthTrust Bank of SW FL 1530 Heitman Street Fort Myers, FL Vice President    Vice President   Change   Waddign			
Tifle			L DEL	k I E	2.1 TITLE				Change	Addition or	
NAME					2.2 NAME		D  -Ri	egina Smith, Lee Cnty Ofc o	Ec.	on. Dev.	
STREET AUDRESS					2 3 STREE	T ADDR	iss   <b>2</b> .	180 W. First St., Suite 306			
CITY-ST ZIP					2 4 CITY-	ST-ZIP		ort Myers, FL 33901			
TITLE			∐ DEL	ETE	3 1 TITLE	4.	S	ecretary/Treasurer	Change	Addition 💢	
NAM:					32 NAME		D ∽W:	illiam Blevins, First Union	Mat	ll Bank	
STREET ADDRESS					33 STREE	T ADDR	SS   58	801 Pelican Bay Boulevard	Mac	1 Dally	
CTY SL 70°	***************************************				3 4. CITY	ST-71P	Ná	aples, FL 33963			
DIES			☐ DEL	ETE	4 1 TITLE				Change	Addition	
NAMŁ					4. 2 NAME						
STREET ADDRESS					4.3 STREE	t <b>a</b> ddri	ss				
CITY - ST - ZIF	· · · · · · · · · · · · · · · · · · ·				4.4 CITY-	ST-ZIP					
TOLE			☐ DELE	ETE	5.1 TITLE				Change	Addition	
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREE	T ADDRE	ss	<u> </u>	<u> </u>		
CHY-ST ZIP					5.4 CITY-	ST-ZIP			5 7	5-24	
TITLE			☐ DEL4	ETE	6.1 TITLE				Change	Addition	
NAME					6 2 NAME	,	Ì	50000212310 -03/25/9701009038	<b>.</b>		
STREET ADDRESS					6 3 STREE	T ADDRE	ss	-U3/25/9/U1UU9U3E	j		
C-TY - S1 - Z0P			***************************************		64 City-	ST - 21P		****61、25		ļ	
I am an offic		piemei a recei	intal annual rep iver or trustee (	empowei	red to exec			in Section 119.07(3)(i), Florida Statutes. I further cer my signature shall have the same legal effect as if m t as required by Chapter 617, Florida Statutes; and th			
SIGNATU	IRE: YCl ginu	r H	mit	>				3 /5 /07 9/1 /330	_214	.,	
	SIGNATURE AND TYPED OR PR	INTED N	AME OF BIGNING	OFFICER O	R DIRECTOR			3/5/97 941/338 Date Daytime	Phone #	) <del>1</del>	
	Regina Smi	th,	Vice Pr	esid	ent						