## 5-16-97 B- 7450 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

N95000003293 (6)

VICTORIA SHORES B, INC.

Principal Place of Business

Mailing Address

108 HUNTINGTON DRIVE
NAPLES FL 33942

Mailing Address

108 HUNTINGTON DRIVE
NAPLES FL 34109-1636

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## FILED May 16 1997 8:00am Secretary of State

Date Incorporated or Qualifie 07/06/1995	d 3a. D	3a. Date of Last Report 06/27/1996	
FEI Number 65-0604061		Applied For	
1 001400166		Not Applicable	
. Certificate of Status Desired		\$8.75 Additional Fee Required	
<ul> <li>Election Campaign Financing Trust Fund Contribution</li> </ul>		\$5.00 May Be Added to Fees	
This corporation has liability f	or Intangible	tax under s. 199.032,	

ANDERSON, RAY F 108 HUNRINGTON DRIVE NAPLES FL 33942

Country

9. Name and Address of Current Registered Agent

Robert B Couch 6732 Lone Oak Blud Naples FL, 34109

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

	Florida Statute	s Yes No
	10. Name and Ad	dress of New Registered Agent
81	1 Name	
62	2 Street Address (P.O. Box Number	er is Not Acceptable)
63	3	
84	4 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

Country

agent. La	m familiar who, and accept the obligations of Section 617.0503, Flo	rida Statutes.	
SIGNATURE	Kolet B. Coul		4-10-97
10		Registered Agent signature requir	
12.	OFFICERS AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		1.1 TITLE	☐ Change ☐ Addition
NAME	ANDERSON, RAY F	1.2 NAME	
STREET ADDRESS	108 HUNTINGTON DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	NAPLES FL 33942	1.4 CITY+ST-ZIP	
TITLE	<b>D</b> DELETE	21 TITLE	Change Addition
NAME	WHITE, CYNTHIA L	22 NAME	mpt .
STREET ADDRESS	108 HUNTINGTON DRIVE	2.3 STREET ADDRESS	
DITY-ST-ZIP	NAPLES FL 38942	2. 4 CITY-ST-ZIP	
TITLE	D DELETE	3.1 TITLE	Change Addition
NAME	CONROY, J T III	3.2 NAME	
STREET ADDRESS	975 SIXTH AVENUE SOUTH STE 101	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	3.4. CITY-ST-ZIP	
THLE	D-President DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Steve Milligan	4. 2 NAME	
STREET ADDRESS	Steve Milligan 9650 Victoria Lane #1088	4.3 STREET ADDRESS	
CITY-ST-ZIP	Noples FL 34109	4.4 CITY - ST - ZIP	
TITLE	Director	5.1 TITLE	Change Addition
NAME		5.2 NAME	·
STREET ADDRESS	Robbin Alice 9650 Victoria Lane # 305B	5.3 STREET ADDRESS	
CITY - ST - ZIP	Noples FL 34109	5.4 CITY - ST - ZIP	
TITLE	Guy Dufresne Director DELETE	6.1 TITLE	Change Addition
NAME	and the terms	6.2 NAME	
STREET ADORESS	9650 Victoria Lane # 2018	6.3 STREET ADDRESS	
City - St - 7IP	Nonlas El 24/09	RAPITY-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, 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address?

SIGNATURE:

THAT P. MORRES

4/14-97 597-6057