**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 # **P04230** **(9)**

1. Corporation Name
**UNITED LELY INVESTMENTS, INC.**

Principal Place of Business
**8825 TAMIAMI TRAIL E.**
**NAPLES FL 33962**

Mailing Address
**8825 TAMIAMI TRAIL E.**
**NAPLES FL 33962**

3. Date Incorporated or Qualified: **12/04/1984**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **47-0586500** ☐ 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**

**SENKEVICH, WILLIAM J.**
**8825 TAMIAMI TR. E.**
**NAPLES FL 33962**

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

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.150(4), 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: Signature (Typed or printed name of signing officer and title of officer) — Date — Registered Agent Signature required when filing/change — DATE

**12. OFFICERS AND DIRECTORS**

| | | |
|---|---|---|
| TITLE | P | ☐ DELETE |
| NAME | SENKEVICH, WILLIAM J. | |
| STREET ADDRESS | 8825 TAMIAMI TRAIL E. | |
| CITY, ST, ZIP | NAPLES FL | |
| TITLE | V | ☒ DELETE |
| NAME | AGNELLI, JOHN J. | |
| STREET ADDRESS | 8825 TAMIAMI TRAIL E. | |
| CITY, ST, ZIP | NAPLES FL | |
| TITLE | STD | ☐ DELETE |
| NAME | BOOM, JORIS | |
| STREET ADDRESS | BUTZENWEG 20 CH-6300 | |
| CITY, ST, ZIP | SWITZERLAND | |
| TITLE | D | ☐ DELETE |
| NAME | VAN DER LELY, OLAF | |
| STREET ADDRESS | BUTZENWEG 20 CH-6300 | |
| CITY, ST, ZIP | SWITZERLAND | |
| TITLE | D | ☐ DELETE |
| NAME | VEGA, JR., GEORGE | |
| STREET ADDRESS | 2660 AIRPORT ROAD | |
| CITY, ST, ZIP | NAPLES FL | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY, ST, ZIP | | |

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

| | |
|---|---|
| 1.1 TITLE | ☐ Change ☐ Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | ☐ Change ☐ Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 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 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:** [signature] WILLIAM J. SENKEVICH 2/13/96 941-643-2424

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)