FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39443

(7)

-DALTON, GREINER, HARTMAN, MAHER & CO., INC.

APPROVED AND FILED

1997 APR 15 PH 2: 16

SECRETARY OF STATE TALLAHASSEE. FLORIDA

Principal Plac 1100 5TH AVE SUITE 301 NAPLES FL 33	-	1100 5TH / SUITE 301	ERS, INC Communication DOPENS AVENUE SOUTH . 34102-8407	C. A fild	4/1/27)			
US US						3. Date Incorporated or Qualified 3a. Date of Last Report		
2. Principal F	Place of Business	2s. Mailing	1 Aridress			06/29/1992 4. FEI Number	01/30/19	Applied For
21	THOSE OF FRANCISCO	26	g Moulodd			13-3567613	-	Not Applicable
Suite, Apt.	. #, etc.		Apt. #, etc.				□ \$8.	75 Additional
22		27				5. Certificate of Status Desired		ee Required
City & State City & State					6. Election Campaign Financing		.00 May Be	
23	Complex	28		0		Trust Fund Contribution		ded to Fees
Ζη: 24	Country	Zip	}	Country 30		This corporation has liability for Florida Statutes	intangible tax un: ☐ Yes ☐ No	der s. 199,032,
24	25 9. Name and Address of Curr	29 ent Registered A		30		10. Name and Address of New Re		
KEE	LER, MICHAEL W			81	Name			
	0 5TH AVENUE SOUTH			-	6	(0.6. B. 14		
	TE 301			82	Street Addr	ess (P.O. Box Number is Not Acceptal	Die)	
	PLES FL 33940			83				
				-				
				84	City		FL 85	Zip Code
office or agent 1 a	registered agent, or both, in the Sta am familiar with, and accept the ob-					oration submits this statement for the lion's board of directors. I hereby acce	pt the appointme	nt as registered
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	CTORS IN 12
THLF	C		DELETE	1,1 TITLE			☐ Chi	ange Addition
NAME	DALTON, TIMOTHY			1.2 NAME				
STREET ADDRESS	1100 5TH AVE. SOUTH SUIT	E 301		1.3 STREET	ADDRESS	400002	1450C)4D
CHY ST-ZIF	NAPLES FL		T 1 000 000	1.4 CITY - S	T-ZIP	-04/16	/970106	4001
TIBLE	VI MARTHANI MARCO C		DELETE	2.1 TITLE		非非非常 1 [55.00 L	4001 **165.00
NAME	Hartman, James F. 1100 5th ave south suiti	= 904		2.2 NAME				1
STREET ADORESS	NAPLES FL	2 30 1		2.3 STREET	· .	• .		1
CHY-ST ZIP TRUE	PS		DELETE	2. 4 CITY - : 3.1 TITLE	SI-ZIP		[] Ch	ange Addition
NAME	GREINER, KENNETH J.		hand we want to	3.1 THE			L., U.K	engo Li Muluidi)
STHELL ANDRESS	1100 5TH AVE SOUTH SUIT	E 301		3.3 STREET	ADDRESS			
CITY - SI - AP	NAPLES FL	= - -		3.4. CITY - 1				
TILLE 7	ľ		DELETE	4.1 TITLE			Chi	ange Addition
NAME 🔏	MAHER, KEVIN J.			4. 2 NAME				
STREET ACORESS		E 301		4.3 STREET	ADDRESS			ĺ
C(1Y+51-2)F	NAPLES FL			4.4 CITY - S				
10118	V		DELETE	51 TITLE			☐ Ch	ange Addition
NAME	KEELER, MICHAEL W			52 NAME)
STREET ADDRESS	1100 5TH AVE SOUTH SUIT	E 301		5.3 STREET	ADDRESS			
(11Y+\$1+7IP	NAPLES FL			5.4 CITY - S	T-ZIP			
1/11/16			DELETE	6.1 TITLE			☐ Chi	ange []] Addition
NAME				6.2 NAME			_	NO NO
STREET ACORESS				6.3 STREET	ADDRESS		c	THOM
CH1Y - S.C - 20F				6.4 CITY - S	T-21P	<u> </u>		W (' '

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 eddress.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/97

261-3500