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

PROFIT CORPORATION ANNUAL REPORT **1998**		FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000008311 (2)

1. Corporation Name

LINDA OF NAPLES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3033 RIVIERA DR S201 NAPLES FL 34103 US	3033 RIVIERA DRIVE SUITE 201 NAPLES FL 33940 34103 US

3. Date Incorporated or Qualified
12/01/1992

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0434484	Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip 34103	30 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BUDD, DAVID G 3033 RIVIERA DRIVE SUITE 201 NAPLES FL-33940 34103	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City ___ FL ___ 85 Zip Code 34103

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if application   (NOTE: Registered Agent signature required when reinstating)   DATE

12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VASD	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	RUBIN, LINDA		1.2 NAME			
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 201		1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		1.4 CITY-ST-ZIP			
TITLE	P	☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME	RUBIN, ALEX		2.2 NAME			
STREET ADDRESS	3033 RIVIERA DR S201		2.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	RUBIN, BENJAMIN		3.2 NAME			
STREET ADDRESS	3033 RIVIERA DR S201		3.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP			
TITLE	V	☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME	BUDD, DAVID G		4.2 NAME			
STREET ADDRESS	3033 RIVIERA DR S201		4.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP			
TITLE	TS	☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME	RUBIN, HARRY		5.2 NAME			
STREET ADDRESS	3033 RIVIERS DR S201		5.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		5.4 CITY-ST-ZIP			
TITLE	AS	☒ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME	BUOCARO, SHARON M		6.2 NAME			
STREET ADDRESS	3033 RIVIERA DR S201		6.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		6.4 CITY-ST-ZIP			

14. I 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 address.

SIGNATURE: _David G. Budd_   David G. Budd,   3/2/98   (941) 263-7700

CR2E034 (10/97)