


FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

FILED

Apr 04 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P92000014799 (0) 1. Corporation Name NAPLES MACHINE COMPANY, INC.			
Principal Place of Business 3942 ARNOLD AVENUE NAPLES FL 33942 US		Mailing Address 3942 ARNOLD AVENUE NAPLES FL 34104-3302 US	
2. Principal Place of Business		3a. Date of Last Report	
21 Suite, Apt. #, etc.		12/23/1992	
22 City & State		3a. Date of Last Report 04/02/1996	
23 Zip		4. FEI Number 65-0378502	
24 Country		Applied For Not Applicable	
25		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
26		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
27		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
28		9. Name and Address of Current Registered Agent	
29		10. Name and Address of New Registered Agent	
30		81 Name	
31		82 Street Address (P.O. Box Number is Not Acceptable)	
32		83	
33		84 City	
34		FL 85 Zip Code	
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 applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
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 address.			



CR2E034 (9/96)

SIGNATURE:

Susan A. Gibbs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-97

Date

941-262-1987

Daytime Phone #