

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 17 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000015247 (9)

1. Corporation Name

SCC OF NAPLES, INC.

Principal Place of Business

5551 RIDGEWOOD DRIVE
SUITE 203
NAPLES FL 33963

Mailing Address

MACQUE, PAMELA S
SUITE 203
NAPLES FL 33963
USA

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified

12/28/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0376119

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

5551 Ridgewood Dr

27

Suite, Apt. #, etc.

28

NAPLES FL

29

Zip

30

Country

USA

9. Name and Address of Current Registered Agent

CRAWFORD, J. STEPHEN
5551 RIDGEWOOD DRIVE
SUITE 201
NAPLES FL 33963

10. Name and Address of New Registered Agent

81

Name

MARY A. MARNELL, P.A.

82

Street Address (P.O. Box Number is Not Acceptable)

5551 Ridgewood Dr. #201

83

84

City

NAPLES

FL

85

Zip Code

33963

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

Mary Marnell

(Signature typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required after reappointing)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

DP
CORACE, RICHARD F
% 5551 RIDGEWOOD DRIVE, SUITE 203
NAPLES FL

DVS
GRIFFIN, GERALD F
% 5551 RIDGEWOOD DRIVE, SUITE 203
NAPLES FL

~~DVS~~
~~HIGH, TOM M.~~
~~% 5551 RIDGEWOOD DRIVE, SUITE 203~~
~~NAPLES FL~~

D
MCARDLE, DAVID A
311 KAUTZ ROAD
ST CHARLES IL 60174

D
MCARDLE, EDWARD J
311 KAUTZ ROAD
ST CHARLES IL 60174

D
KEPLEY, RICHARD B
244 SPRING LINE DRIVE
NAPLES FL 33940

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

100001459181
-04/18/95-01081-015

***200.00 ☒ Change ☐ Addition

☒ Change ☐ Addition

D,VP,T,S
Keith A. Sharpe
5551 Ridgewood Dr. #203
NAPLES FL 33963

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 that I am a partner 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, in an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard F. Corace, President

3/21/95

813-598-2800
Toll-Free Number