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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT** # P93000008923 (3)

## **FILED** Feb 25 1998 8:00am Secretary of State

BRUCE	E DALLY MANAGEMENT, IN	IC.				
Principal Plac	ce of Business	Mailing Address			- I TORNIARE IN PANEO LYALL BOND BELLE OF UNIVERSE	i Beier 1816 opera 11 <b>000</b> 1111 1 <b>00</b> 4
1371 COMMERCIAL BLVD. NAPLES FL 33942  1371 COMMERCIAL BLVD. NAPLES FL 33942			D.	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
					02/04/1993	
2. Principal F	Place of Business	2a. Mailing Address	***************************************		4. FEI Number	Applied For
21 26					65-0384506	Not Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
27					C. Common of Clares Desires	Fee Required
23 City & Star	City & State				6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Zip Country Zip		Country		Trust Fund Contribution	Added to Fees
24	25	<b>⊢</b>	Country	/	8. This corporation owes or has paid the	
24	9. Name and Address of Curre	29  nt Registered Agent	30]		Personal Property Tax due June 30.  10. Name and Address of New Registe	Yes No
MA	<del></del>		81	Name	10. Italia and Address of How Hegiste	iou Agein
NAPIER, RONALD L 1570 SHADOWLAWN DRIVE NAPLES FL 33942						
			62	Street Addre	ess (P.O. Box Number is Not Acceptable)	
137	rted ft 33842		83	<u> </u>		
			84	City	. 1	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508. Florida Statu	es, the above	e-named corpo	oration submits this statement for the purpo	se of changing its registered
office or s	registered agent, or both, in the State	of Florida. Such change was	authorized by	the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the	appointment as registered
	and accept the oblig	ations of, Section 607,0505, Fi	orida Statute:	5.		
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NO)	E: Registered Age	ont signature require	d when reinstating) DA	TE .
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PTVS	DELETE	1.1 TITLE			Change Addition
NAME	DALLY, BRUCE		1.2 NAME			
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZIP	NAPLES FL 33942		1.4 CITY - S	T-ZIP		
TITLE	D	☐ DELE <b>te</b>	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition €
NAME	DALLY, BRUCE		2.2 NAME			
STREET ADDRESS	1371 COMMERCIAL BLVD.		2.3 STREET	ADORESS		
CITY-ST-ZIP	NAPLES FL 33942		2. 4 CITY - S	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		•	Change Addition
NAME			3.2 NAME			
STREET ADDRESS	33 \$		3.3 STREET	ADDRESS		
CITY-ST-ZIP	<del>-</del>	F	3.4. CITY - S	ST-ZIP		
TITLE	•		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP		4.4.01		T-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME OTOTET ADDRESS			5.2 NAME			
STREET ADDRESS			5.3 STREET	i		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		Oh
TITLE		☐ DELÉTÉ	6.1 TITLE			Change Addition
NAME CTOTET ADDOCCO			6.2 NAME			1
STREET ADDRESS			6.3 STREET			
CITY-ST-ZIP			6.4 CITY - ST	1-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.