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

Mailing Address

**PROFIT CORPORATION ANNUAL REPORT** 

1997

Principal Place of Business

NAME

 $\langle \dot{\dot{\gamma}} \rangle$ STREET ADDRESS



ELORIDA DEPARTMENT OF STATE

**FILED** 

Mar 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000011224 (1)

RESORT PROPERTIES OF NAPLES, INC.

1111 W. MOCKINGBIRD, STE 1400 1901 QULF SHORE BLVD. NORTH DALLAS TX 75247-5014 NAPLES FL 33940 3. Date Incorporated or Qualified 3a. Date of Last Report 02/15/1993 05/01/1996 4. FEI Number 2. Principal Place of Business 2a, Mailing Address Applied For 65-0399468 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Zip Country ŽιD 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AYERS, JOHN E JR **EDGEWATER BEACH HOTEL** Street Address (P.O. Box Number is Not Acceptable) 1901 GULF SHORE BLVD., NORTH คร NAPLES FL 33940 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 1111.6 TITLE ESPING, KATHRYN R 1.2 NAME NAME 4330 BORDEAUX 1.3 STREET ADDRESS STREET ADDRESS DALLAS TX 75205 CITY-ST-ZIP 1,4 CITY - \$1 - ZIP Change Addition DELETE 2.1 TITLE TITLE **ESPING, JULIE LYNN** 2.2 NAME NAME 3702 HOLLAND AVE., STE. 2 2.3 STREET ADDRESS STREET ADORESS DALLAS TX 75219 2. 4 CITY-S1-ZIP CITY-ST-ZIP ■ Addition DELETE Change TITLE 3.1 TO LE **ESPING, WILLIAM PERRY** 3.2 NAME NAME 4330 BORDEAUX STREET ADDRESS 3.3 STREET ADDRESS DALLAS TX 75205 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE **ESPING. JENNIFER** NAME 4. 2 NAME 4330 BORDEAUX 4.3 STREET ADDRESS STREET ADDRESS DALLAS TX 75205 4.4 C(1Y - S1 - Z(P CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE WATTERS, JOHN 5.2 NAME NAME 1111 W. MOCKINGBIRD LANE 5.3 STREET ADDRESS STREET ADDRESS DALLAS TX 75247 5.4 CITY - ST - ZIP OITY-ST-ZIP Change Addition DELETE TITLE 6.1 TITLE 617

14. I do hereby certify that the information supplied with this filling 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 enanged, or on an attachment with an address.

6.3 STREET ADDRESS

6.2 NAME