

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90107 038 \*\*\*150.00

DOCUMENT # P93000012226

1. Corporation Name  
XL DEVELOPMENTS, INC.

Principal Place of Business  
440 15TH AVENUE SOUTH  
NAPLES FL 33940 34102

Mailing Address  
440 15TH AVENUE SOUTH  
NAPLES FL 33940 34102

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/08/1993

4. FEI Number

65-0393438

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 owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PELC, ANTOINETTE  
440 15TH AVENUE SOUTH  
NAPLES FL 33940

81 Name

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

83

84 City

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

TITLE D ☐ DELETE

NAME PELC, WACLAW M  
STREET ADDRESS 440 15TH AVE SO  
CITY-ST-ZIP NAPLES FL 33940

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME PELC, ANTOINETTE  
STREET ADDRESS 440 15TH AVE SO  
CITY-ST-ZIP NAPLES FL 33940

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME WARD, WHITLEY S  
STREET ADDRESS 2171 FORREST LANE  
CITY-ST-ZIP NAPLES FL 33940

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME WARD, BRENDA R  
STREET ADDRESS 2171 FORREST LANE  
CITY-ST-ZIP NAPLES FL 33940

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE:

ANTOINETTE PELC 4/25/99 941-434  
8441

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0455298