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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P93000035476 (9)

D.F.B. DEVELOPMENT, INC.

FILED

98 MAR 17 AM 9: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address			(
6304 BURNHAM RD.	6304 BURNHAM RD.			
NAPLES FLYGGE	NAPLES FL SESSE		DO NOT WRITE IN THI	S SPACE
			3. Date Incorporated or Qualified	3 OFACE
			05/17/1993	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0426396	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired	\$8.75 Additional
22	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the c	
24 34119 25	29 34119 3	¬ `	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curren			10. Name and Address of New Registere	d Agent
PRICE, MARK J ESQ 81 Name				
ROETZEL & ANDRESS		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
2008 TAMMANN TRANS, 25UFE: 27 8			Park Shore Drive, 3rd	Floor
MAPLES: FLX38940:		83		
		64 City Naple	s F	2ip Code B 4 1 0 3
11. Pursuant to the provisions of Sections 607.050	2 and 607,1508, Florida Statutes,	the ehrwe-named or	progration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the Space 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 appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent.				
		sa siaratos.	2191	198
SIGNATURE Signature, lyped or printing and of registered ages	nt and title if applicable (NOTE: F	Registered Agent signature rec	quired when reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	☐ DELETÉ	1.1 TITLE		K Change Addition
NAME BAKER, DEXTER F		1.2 NAME		
STREET ADDRESS 6304 BURNHAM RD.		1.3 STREET ADDRESS	341	10
CITY-ST-ZIP NAPLES FL 23999	Printe	1.4 CITY-ST-ZIP	341	Change Addition
TOTLE	☐ DELETE	2.1 TITLE		
NAME		22 NAME	200000	
STREET ADDRESS		2.3 STREET ADDRESS	200002461	12622
CITY-ST-ZIP	DELETE	2 4 City+St-ZiP 3 1 Title	02/10/99	O D Charge O C Addition
NAME	E- DELETE	3.2 NAME	-03/ 19/ 30	Office of The second
STREET ADDRESS		3.3 STREET ADDRESS	****158.75	****158.75
CITY-ST-ZIP		3.4. CITY-ST-ZIP	100,10	*****130.13
TITLE	DELETE	41 TITLE	-	Change Addition
NAME	_	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		У
CITY-ST-ZIP		4 4 CITY-ST-ZIP		VI a
TITLE	DELETE	5.1 TITLE		Clange Addition
NAME		5.2 NAME	(13%)	2 MD
STREET ADDRESS		5.3 STREET ADDRESS	Mr.]] [†]
CITY - ST - ZIP		54 CITY-ST-ZIP		<u>' \</u>
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
1	:			

14. I hereby certify that the information/subplied 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 suppliemental angual 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 faceive of these employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of or an ultra memory with an address.