FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00					
COR ANNL	PROFIT RPORATION JAL REPORT	Sandra B	TMENT OF STATE 3. Mortham by of State		
	1996		ORPORATIONS		
DOCUMENT # P93000059542 (9)					
1. Corporation BORAN	NAME CRAIG BARBER HOM	ES INC.			
Principal Place	of Business	Mailing Address			
3606 ENTERPRISE AVENUE		3606 ENTERPRISE AVEN	3606 ENTERPRISE AVENUE		
NAPLES FL 33942 NAPLES FL 33942					
				 Date Incorporated or Qualified 08/23/1993 	3a. Date of Last Report 04/21/1995
	ace of Business	2a. Mailing Address		4. FEI Number 65-0436877	Applied For
21 Suite, Apt. i	#, etc.	26 Suite, Apt. #, etc.			Not Applicable
22 City & State		27 City & State		5. Certificate of Status Desired	L Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for i Florida Statutes	
	9. Name and Address of C			10. Name and Address of New R	
BARBER	, DONALD R		81 Name		
3606 EN	3606 ENTERPRISE AVENUE			ess (P.O. Box Number is Not Acceptab	le}
NAPLES FL 33942 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 _					
12.	Signature, typed or printed name of registerer OFFICER	d agent and title if applicable. (NOTE: S AND DIRECTORS	: Registered Agent signature required 13.	d when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE NAME	P Barber, Donald R	DELETE	1. 1 TIFLE		Change Addition
NAME STREET ADDRESS	3606 ENTERPRISE AVE		1.2 NAME 1.3 STREET ADDRESS		E034
CITY-ST-ZIP	NAPLES FL EVP		1.4 CITY - ST-ZIP		Å
TITLE NAME	ENGEL, MELVIN	DELETE	2. 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS	3606 ENTERPRISE AVE NAPLES FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TOLE	EVP	DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		Change 🗂 Addition
NAME	FISCHER, VERLYN W JR	—	3 2 NAME		
STREET ADDRESS CHTY - ST - ZIP	3606 ENTERPRISE AVE NAPLES FL		3 3 STREET ADDRESS 3 4 CITY - ST - ZIP		
111LE	VP SMALLWOOD JOSEDH (DELETE	4. 1 TITLE		Change 🔲 Addition
NAME STREET ADDRESS	SMALLWOOD, JOSEPH (3606 ENTERPRISE AVE	ز ز	4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP		
THLF NAME	st Bunnell, Jay	DELETE	5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS	3606 ENTERPRISE AVE		5.3 STREET ADDRESS		
CITY-ST-ZiP TITLE	NAPLES FL	DELETE	5.4 CITY - ST - ZIP 6. 1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS CHTY - ST - ZIP			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		
14. I do hereby	y certify that the information supp	lied with this filing is voluntarily furnish	ed and does not qualify for	or the exemption stated in Section 119.0	07(3)(k), Florida Statutes. I further
certify that the information indicated on this ennual 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 dreptor of the formation 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 Blog at changed, order an attachment with an address.					
SIGNATURE: 425 96 941 -643-3343					
	VICKOTURE AND TYP	EL OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR		Davlinie Phone #