## 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 # P93000071849 (2)

% BATSEL MCKINLEY ITTERSAGEN & GUNDERSON

1861 PLACIDA RD., SUITE 104

ENGLEWOOD FL 34223

FUTURE	S OF BOCA GRANDE,	ING.						
Principal Place	of Business	Mailing Addres	SS	\$ COULDED LIE SEYON SHILL NORTH ONESS ONESS PRINE COURT LINES CHEES GIOLD INTE CHES				
152 CARRICK E BOCA GRANDE US		P O BOX 584 BOCA GRANDE FL 33921 US		DO NOT WRITE IN THIS SPACE				
55		•		Date Incorporated or Qualified     10/15/1993				
2. Principal Pla	ce of Business	2a. Mailing Add	dress	4. FEI Number	Applied For			
21		26		65-0442297 Not Applic				
Suite, Apf #	Suite, Apt #, etc.		#, etc.	5. Certificate of Status Desired	icate of Status Desired S8.75 Additional Fee Required			
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution				
Zip	Country 25	Zip	Country 30	This corporation owes or has paid the curr     Personal Property Tax due June 30.	rent year Intangible Yes			
	9. Name and Address of Cu	irrent Registered Agent		10. Name and Address of New Registered A	Agent			
ITTE	RSAGEN, SCOTT D		81 Name					

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.

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

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SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	Registered Agent signature	required when	reinstating)		DATE		
12.	OFFICERS AND D	13.							
TITLE	DP	DELETE	1.1 TITLE					Change Change	Addition
NAME	YOUNG, ELEANORE T		1.2 NAME						
STREET ADDRESS	152 CARRICK BEND LANE		1.3 STREET ADDRESS						
CITY-ST-ZIP	BOCA GRANDE FL		1.4 CITY-ST-ZIP	BOCA	GRANDE	, FL	33921		
TITLE	DVTS	DELETE	2,1 TITLE			•		Change	Addition
NAME	YOUNG, ROBERT A		2.2 NAME						
STREET ADDRESS	152 CARRICK BEND LN		2.3 STREET ADDRESS						
CITY-ST-ZIP	BOCA RATON FL 33921		2. 4 CITY-ST-ZIP	BOCA	GRAND	E. FL	3392	1	
TITLE		DELETE	3.1 TITLE		<u>-</u>			Change	Additio
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY-ST-ZIP						
TITLE		DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY - ST - ZIP						**
TITLE		☐ DELETE	6.1 TITLE					☐ Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
מודע בד זונה			6.4.0ITV - ST - 7IP	1					

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 eath; 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.

(941)964-1024 1-13-98

**FILED** 

Jan 29 1998 8:00am

Secretary of State