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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

## **FILED** Mar 03 1998 8:00am Secretary of State

Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  Suite, Apt. #, etc.  5. Certificate of Status Desired  City & State  6. Election Campaign Financing	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
### Address ###################################	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
### Address ###################################	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
NAPLES FL 33942 US         NAPLES FL 33941 US         DO NOT WRITE IN           3. Date Incorporated or Qualified 04/01/1994           2. Principal Place of Business         2a. Mailing Address         4. FEI Number           21         26         65-0481611           Suite, Apt. #, etc.         5. Certificate of Status Desired           City & State         6. Election Campaign Financing	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
3. Date Incorporated or Qualified	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
2. Principal Place of Business 22. Malling Address 23. Malling Address 24. FEI Number 65-0481611  Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 27. City & State City & State 6. Election Campaign Financing	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  City & State  Suite, Apt. #, etc.  5. Certificate of Status Desired  City & State  6. Election Campaign Financing	\$8.75 Additional Fee Required \$5.00 May Be
22 2 5. Certificate of Status Desired L City & State City & State 6. Election Campaign Financing	Fee Required \$5.00 May Be
City & State City & State 6. Election Campaign Financing	\$5.00 May Be
_ <b> </b>	
28 Trust Fund Contribution  Zip Country Zip Country 8. This corporation owes or has paid to	
21p Country 21p Country 8. This corporation owes or has paid to Personal Property Tax due June 30.	
Name and Address of Current Registered Agent     10. Name and Address of New Registered	tered Agent
DAYE, HOLLY	
1298 GRAND CANAL COLLIER FL 33963  82 Street Address (P.O. Box Number is Not Acceptable)	
63	
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 purp	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purp office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	e appointment as registered
SIGNATURE	DATE
Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER	
TITLE D DELETE 1.1 THLE	☐ Change ☐ Addition
NAME DAYE, HOLLY 12 NAME	
STREET ADDRESS 1298 GRAND CANAL 1.3 STREET ADDRESS 1.4 OITY-ST-ZIP NAPLES FL 1.4 OITY-ST-ZIP	
CITY-ST-ZIP NAPLES FL 1.4 OITY-ST-ZIP  TITLE DELETE 2.1 TITLE	☐ Change ☐ Addition
NAME 2.2 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP 2.4 CITY-ST-ZIP	The state of the s
TITLE DELETE 3.1 TITLE  NAME 3.2 NAME	Change Addition
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TAILE	Change Addition
NAME 4.2 NAME	•
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 44 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	Taken Taken
TITLE DELETE 6.1 TITLE	☐ Change ☐ Addition
NAME  6.2 NAME  STREET ADDRESS  6.3 STREET ADDRESS	
CITY-ST-ZIP 64 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)(1), Florida Statutes. I furtindicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if ma officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATIBE:	ide under oath; that I am an I that my name appears in