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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

MARLES R. 499695 S Y /O S MAPLES R. 19108-2707 MAPLES R. 19108-2	Secretary of State		
SUITE 640 MAPLES R. 39895 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			
2. Principal Plane of Business	··		
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City & State City & Country Zip Country Adde City Country Adde City C	Additional		
Trust Fund Contribution Adde Ad	Required • May Bo		
28 29 30 Florida Statutes \$\frac{1}{2} \text{ No } No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10.	d to Fees		
9. Name and Address of Current Registered Agent WOODWARD, MARK J 801 LAUREL OAK DRIVE SUITE 640 NAPLES FL 89863 JY / 0 8 82 Sireet Address (P.O. Box Number is Not Acceptable) 83 Factor Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zireet Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing 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 agent. Lam lamblar with and accept the obligations of. Section 607.0505, Florida Statules. SIGNATURE Signature, special period make of registered agent and lamblar application. Policy of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment agent. Lam lamblar with and accept the obligations of. Section 607.0505, Florida Statules. SIGNATURE Signature, special period make of registered agent and lamblar application. Policy of the proposed agent agent and application's board of directors. I hereby accept the appointment agent. I am lamblar application agent. I am lamblar application. Policy of the proposed agent agent and application agent. I am lamblar application agent and lamblar application agent. I am lamblar appl	s. 199.032,		
## WOODWARD, MARK J SUITE 640 NAPLES FIL 89963 5Y/08 ## City			
SUITE 640 NAPLES FL 89863 JY/ 0 8 88 88 City FL 85 ZI 11. Fursuant to this provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing discorer 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 agent. I am familiar with, and accept the obligations of, Soction 607,0505, Florida Statutes. SIGNATURE Signal re, type due punied tank of represent agent and title if applicable OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. In TITLE D FERRAO, AUBREY J 4001 NORTH TAMIAMI TRAIL, SUITE 350 NAPLES FL 83940 3 4 / 0 3 NAPLES FL 83940 3 4 / 0 3 DELETE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. SADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. SADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. In TITLE D HAYES, JOHN 4001 NORTH TAMIAMI TRAIL, SUITE 350 NAPLES FL 83940 3 4 / 0 3 DELETE 23. TIRE 24. TIRE 24. TIRE Change WOODWARD, MARK J 801 LAUREL OAK DRIVE, SUITE 640 NAPLES FL 33969 3 4 / 0 3 STREET ADDRESS ALCITY-SI-2P DELETE 41. TITLE Change Change ACTITY-SI-2P DELETE 41. TITLE Change Change Change ACTITY-SI-2P DELETE 51. TITLE Change Ch			
NAPLES FL 89963 54/08 83 84 City FL 85 Zi 11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing difference 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 agent Lam familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes, SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 0. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 0. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS 0. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES 14. ADDITION	,,,,,		
11. Pursuent to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing agent. The provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment a agent. The purpose of changing agent. The purpose of changing agent and the obligations of, Soction 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. This FERRAO, AUBREY JOHN JOHN AND ALES FL 33940 3 1/0 3 1.3 THEFT ADDRESS NAPLES FL 33940 3 1/0 3 1.4 CITY-SI-ZP 11. This DAY SI-ZP 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. This DAY SI-ZP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. THIS DAY SI-ZP 17. THE DAY SI-ZP 16. THIS DAY SI-ZP 16. THIS DAY SI-ZP 16. THIS DAY SI-ZP 17. THIS DAY SI-ZP 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. THIS DAY SITURE TO THE OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO			
THE PURSUANT TO THE provisions of Sections 607 0502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment agent it are familiar with, and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE	p Code		
SIGNATURE Signature typector printed name of reparenced agent and time if applicable (NOTE Registered Agent signature required when reintegring) DATE			
SIGNATURE Signature Lyce for printed name of responsed against and tallo if applicable Mark	its registered as registered		
Structure, traced or periodic race of reposered agent and the it applicable (NOTE Reposered Agent signature required when reinstative) DATE			
TITLE			
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14. I do 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 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 it I am an officer or director of the proportion or the reacher or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my appears in Block 12 or Block 13 in chapted, or or an attachment with an address.	at the under oath: th		

FILED

May 12 1997 8:00am