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

FILED Feb 04 1998 8:00am Secretary of State

	MENT # P9400 O DEVELOPMENT CORPO				L INDINANA NIA YOME DENIE BANKE ANNI ANDRE ANGER	1940 IU440 IO140 IO141 OI44 HOO
Principal Place of Business Mailing Address						
NAPLES FL 34110 NA		1916 EMPRESS CT Naples FL 33942			DO NOT WRITE IN THE	S SPACE
U\$					Date Incorporated or Qualified 05/05/1994	
2. Principal Pi	2. Principal Place of Business 2e. Mailing Address				4. FEI Number	Applied For
21	26				65-0517543	Not Applicable
	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 27						
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country Zip 25 29 30		⊢ — '	Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		☐ Yes ☐ No
	9. Name and Address of Curr	ent Registered Agent		Т	10. Name and Address of New Registere	d Agent
	Ugger, John N		81			
600 FIFTH AVE S			82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE 210 NAPLES FL 34102			83	;		
TACK.	I DEO I E OTIOE		84	City		■ 85 Zip Code
				1	F	
office or r	to the provisions of S ections 607.0 egi ste red agent, or both, in the Sta m f a miliar with, an d a ccept the obl	to of Florida. Such channe was	authorized b	v the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE	Signature, typed or printed name of registered	ANC)	TE Bookload Ac	onle cosaluto roa u	red when reinstating) DATE	
12.		ND DIRECTORS	13.	on agricular regar	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPVS	☐ DELETE 1.1				Change Addition
NAME	DOMOEO, LIMEO		1.2 NAME			
STREET ADDRESS	1916 EMPRESS CT		. 1.3 STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL			S1-ZIP		Change Addition
TITLE	DOUGLA FOREST	DELETE	21 TITLE 22 NAME			
NAME OTOTET ADDRESS	DONOLO, ERNEST 1916 EMPRESS CT			T ADDRESS		
STREET ADDRESS CITY-ST-ZIP	NAPLES FL		2.4 CITY-ST-ZIP			
TITLE			3.1 TITLE	31 En		Change Addition
NAME			3.2 NAME			·
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE	-	DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - 5.1 TITLE	51-ZIP		Change Addition
TITLE			5.1 NAME			and a consider
NAME Street address				T ADDRESS		
CITY-ST-ZIP			5.4 CITY -	1		
TITLE	DELETE		. 6.1 TITL€			Change Addition
NAME			6.2 NAME	1		
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 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)(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 oath; 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.