

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

FILED

Apr 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000068501 (3)**

1. Corporal on Name

**SCOTT ENTERPRISES, INCORPORATED**



Principal Place of Business <b>371 PIRATE'S BIGHT NAPLES FL 33940</b>	Mailing Address <b>371 PIRATE'S BIGHT NAPLES FL 34103-2418</b>
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2. Principal Place of Business <b>21</b>		2a. Mailing Address <b>26</b>		3. Date Incorporated or Qualified <b>09/15/1994</b>	3a. Date of Last Report <b>05/09/1996</b>
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>		4. FEI Number <b>65-0521149</b>	Applied For Not Applicable
City & State <b>23</b>		City & State <b>28</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>34103</b>	Country <b>25</b>	Zip <b>29</b>	Country <b>30</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>SCOTT, RICHARD E 371 PIRATE'S BIGHT NAPLES FL 33940</b>				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	<b>FL</b>
				85. Zip Code	<b>34103</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PS</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>EVS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SCOTT, RICHARD E</b>		1.2 NAME	
STREET ADDRESS <b>371 PIRATE'S BIGHT</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>NAPLES FL</b>		1.4 CITY-ST-ZIP	
TITLE <b>EVT</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>PT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SCOTT, ELLONEY M</b>		2.2 NAME	
STREET ADDRESS <b>371 PIRATES' BIGHT</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>NAPLES FL</b>		2.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SCOTT, HEATHER M</b>		3.2 NAME	
STREET ADDRESS <b>15420 LIVINGSTON AVE APT 502</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>LUTZ FL</b>		3.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SCOTT, RICHARD K</b>		4.2 NAME	
STREET ADDRESS <b>15420 LIVINGSTON AVE APT 502</b>		4.3 STREET ADDRESS <b>371 PIRATE'S BIGHT</b>	
CITY-ST-ZIP <b>LUTZ FL</b>		4.4 CITY-ST-ZIP <b>NAPLES, FL 34103</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>SCOTT, TIMOTHY M</b>		5.2 NAME	
STREET ADDRESS <b>371 PIRATE'S BIGHT</b>		5.3 STREET ADDRESS	
CITY-ST-ZIP <b>NAPLES FL</b>		5.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>JOHNSON, CELINE M</b>		6.2 NAME	
STREET ADDRESS <b>6857 MILL RUN CIRCLE</b>		6.3 STREET ADDRESS	
CITY-ST-ZIP <b>NAPLES FL</b>		6.4 CITY-ST-ZIP	

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 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.

SIGNATURE: Richard E. Scott (RICHARD E. SCOTT) 4/19/97 941/434-5735

CR2E034 (9/96)