

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 08 1997 8:00am
Secretary of State

DOCUMENT # **P94000070201 (6)**

1. Corporation Name

SANDERS GROUP, INC.



Principal Place of Business

**2338 IMMOKALEE RD
SUITE 225
NAPLES FL 33942**

Mailing Address

**2338 IMMOKALEE RD
SUITE 225
NAPLES FL 34110-1445**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**KANTOR, WARREN
2338 IMMOKALEE RD
SUITE 225
NAPLES FL 33942**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

09/23/1994

3a. Date of Last Report

07/18/1996

4. FEI Number

65-0292032

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--------------------------------|---|--------------------------------------|
| TITLE | PVPS | 1.1 TITLE | D |
| NAME | KANTOR, WARREN | 1.2 NAME | WARREN KANTOR |
| STREET ADDRESS | 2338 IMMOKALEE RD, #225 | 1.3 STREET ADDRESS | 2338 IMMOKALEE RD., SUITE 225 |
| CITY-ST-ZIP | NAPLES FL | 1.4 CITY-ST-ZIP | NAPLES, FL 33942 |
| TITLE | | 2.1 TITLE | P |
| NAME | | 2.2 NAME | KATRINA CLOUSER |
| STREET ADDRESS | | 2.3 STREET ADDRESS | 2338 IMMOKALEE RD., SUITE 225 |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | NAPLES, FL 33942 |
| TITLE | | 3.1 TITLE | T |
| NAME | | 3.2 NAME | PAUL KIRK |
| STREET ADDRESS | | 3.3 STREET ADDRESS | 2338 IMMOKALEE RD, SUITE 225 |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | NAPLES, FL 33942 |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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 as changed, or on an attachment with an address.

SIGNATURE

Travis W. Mortham

7/6/97

CR2E034 (9/96)